

UNIVERSITY OF KWAZULU-NATAL

***“SIHLUKUMEZEKILE”* THE ELDERLY TALK OF THEIR EXPERIENCES OF
ELDER VULNERABILITY IN KWASWAYIMANI AREA**

By:

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DEDICATION

This dissertation is dedicated to my son Lesedi Emmanuel Mosoeu, my mother Innocentia Mosoeu and my wife Lungile Mosoeu. I sincerely appreciate their encouragement, love, understanding and support.

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I thank my God Almighty for guiding and granting me the strength to complete this dissertation. My sincere gratitude also goes to my supervisor Bongi Patricia Zengele for all the support, guidance and encouragement.

I would like to thank the KZN Head of the Department of Social Development and KwaSwayimani Day Care Centre for the Elderly for granting me gate-keeper permission to conduct this study.

To my family, I also thank you for support and understanding during the years of my study.

DECLARATION

I declare that this is the researcher's original work and has not been submitted for a degree in this or any other university. All other sources cited in this dissertation have been acknowledged and referenced.

Signed:

Student: _____ Date _____

Supervisor: _____ Date _____

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ACRONYMS

ABET: Adult Basic Education

KZN: Kwa-Zulu Natal

MEC: Member of Executive Committee

DSD: Department of Social Development

WHO: World Health Organization

CCJD: Centre for Community Justice Development

SAAN: South African Age Network

UKZN: University of Kwa-Zulu Natal

NCOP: National Council of Provinces

NGO: Non-governmental Organization

SAPS: South African Police Services

OPA: Older Persons Act

ABSTRACT

Background: The problem of elder abuse is undeniable and can be found everywhere in the world including South Africa and the Province of KwaZulu-Natal. Robinson (2016) asserts that in the United States alone, more than half a million reports of vulnerabilities that predispose the elderly to abuse reach authorities every year, and millions of more cases go unreported.

Rationale of the study: The rationale of the study is to explore and understand vulnerabilities faced by elderly women in KwaSwayimane Area under Umshwathi Local Municipality where 7 elderly women were raped and assaulted, and the 4 elderly women robbed and murdered during the year 2013.

Research methodology: A qualitative descriptive design was adopted in this study. Data was collected through semi-structured interviews and analyzed using thematic analysis from a purposive sample of 09 elderly women attending KwaSwayimane Day Care Centre.

Results: The results indicated that vulnerabilities that predispose the elderly to abuse are prevalent amongst elderly women especially those who are widowed, living alone, in isolation, and illiterate. The study finding also revealed that the most common vulnerability was as a result of criminal attacks such as housebreakings mostly during pension pay days to steal and rob the elderly of their pension monies and other belongings. The results also showed that financial exploitation by close family members occurred in the home environment where elderly women with their meagre pensions had to take care of their family members such as their unemployed adult children and the grandchildren. Lastly, the results showed that the elderly need various and prompt inter-departmental interventions in-order to make their situation better.

Recommendations: This study recommends a multidisciplinary approach to elder care and management in line with the KZN Premier's Operation Sukuma Sakhe Programme which co-ordinates the delivery of governmental integrated services to communities. It also recommends further research that would explore elder vulnerability as it occurs in the community. The study recommends social work curriculum to include a detailed gerontology syllabus since there is a fast-growing number the elderly in our society who need special social work care.

CHAPTER ONE

1.1. Introduction

This chapter begins with a background that frames the study. Following this is the problem statement, motivation for the study, aim and objectives, underlying assumptions of the researcher, research methodology and the significance of the study. This chapter concludes with definition of the key terminologies used, the area of location and the structure of the study.

1.2. Background to the Study

The problem of vulnerabilities that predispose the elderly to abuse is undeniable and can be found everywhere in the world including South Africa. In KwaZulu-Natal, the Department of Social Development (DSD) together with Non-Governmental Organizations (NGO's) is conducting awareness programmes on elder vulnerabilities but the problem still exists. Despite these programmes, many abused elder persons are still in our midst.

Although there is nothing much done to control elder abuse as such, attempts are being made to help the victims of elder abuse by admitting them into old age homes. Awareness programmes are also implemented by the Department of Social Development in areas where the incidents of elder abuse are high. The expected outcomes of the awareness programmes are that elder persons would be aware of their rights and be able to exercise those rights accordingly. They will be aware of the services and resources available to them, be able to recognize different forms of abuse and be able to take action. However, these programmes are found to be not yielding good results as people attending are mostly elderly women but not the caregivers or family members who appear to be perpetrators. This accords the view expressed by Daichman (2005) that tension and anxiety between the caregiver and the care recipient contribute to elder vulnerability.

According to Golazand Rutaremwa (2011), elderly people are generally considered as being among the most vulnerable groups of the population. Yet, being over 55, 60 or 65years old does not necessarily mean being vulnerable in anyway. Older adults are stakeholders in a

social system in which they both receive and give. In Africa, where rapid population growth and economic changes have greatly transformed livelihoods in the past century, the social role of the older population has also undergone substantial change. Even in a context where their power is being eroded, older persons are often involved as providers until very late in life. In a situation where social security for pensioners is almost non-existent, elderly persons who need special care rely exclusively on their children or their social networks. (Golaz and Rutaremwa, 2011). Hence, this financial dependency among other social problems can create tension between the caregiver and the elderly which can lead to elder vulnerability.

Furthermore, in Uganda, older men are less frequently in situations of vulnerability. Structural and relational vulnerability affect women much more frequently than men (Golaz and Rutaremwa, 2011). Likewise, in South Africa, a situation prevails where elderly women are being more vulnerable than men. Therefore, this study aims to explore and understand vulnerabilities faced by the elderly women in KwaSwayimane Area under Umshwathi Local Municipality.

1.3. Problem Statement

According to Robinson (2016), as quoted by Ferreira and Lindgren (2008), many older persons around the world are being abused, harmed in some substantial way often by people who are directly responsible for their care. In the United States alone, more than half a million reports of abuse against the elderly reach authorities every year, and millions of more cases go unreported.

In 2002, a research conducted by the World Health Organization (WHO) (shows that abuse of older men and women, neglect, violence, and exploitation is one of the biggest issues facing older persons around the world. WHO (2002) data suggest that 4 to 6% of older persons suffer from some form of abuse and a large percentage of which goes unreported. Ferreira and Lindgren (2008) assert that estimates of the prevalence of elder abuse have been difficult to capture because of several factors such as fear, stigma, and lack of trust which prevent people from reporting incidents of abuse.

Dr. Karen Buckenham, a Research Director at the Centre for Community Justice and Development (CCJD) in Pietermaritzburg with support from Help-Age, the South African Age Network (“SAAN”) commissioned a study in 2013 on elder abuse in relation to pensions. This study was conducted in KwaZulu-Natal and Limpopo and showed three things, firstly, that local government structures are, for a variety of reasons, not sufficiently prepared to prevent or respond to issues of elder abuse. Secondly, those cases involving victims of older persons are frequently withdrawn, mainly because of non-attendance of victims and thirdly, that many Departments do not have dedicated units to deal with older abuse matters.

Meeks-Sjostrom, as quoted by Phakathi (2011), states that compared with other types of abuse against women and children, elder abuse and neglect have received little attention. The lack of knowledge and information on elder abuse negatively affects the levels of awareness of, and alertness to the problem among social and health care professionals.

1.4. Motivation for the Study

Having worked at an institution of social welfare services of the Department of Social Development in the UMgungundlovu District Office from the period 2009 to date. The researcher noted the growing number of cases of the elder vulnerabilities that predispose the elderly to abuse, and the general concern by some authorities including those from the Department of Social Development to control the menace.

The researcher’s duties as an employee in the Department of Social Development are to receive and analyze cases of elder vulnerabilities from the eight local service offices of the Department of Social Development in the UMgungundlovu District and report them to the Provincial Office of the Department of Social Development. More so, the researcher observed that cases were reported at the office almost every month. Cases reported were those of abuse that have taken place within the community. There were no cases of abuse reported in the institutions/ old age homes at that time though. However, this may not

necessarily mean that this kind of abuse and neglect is not experienced by the people in the residential facilities.

In view of the current situation of elder vulnerabilities that predispose the elderly to abuse especially in KwaSwayimani area, the study became a challenge for the researcher to try to explore perceptions and experiences of vulnerabilities of elderly women in this area where an ever-increasing number of elder abuses were noted. This accord the view expressed in 2002 by the World Health Organization (WHO), which has shown through research that abuse of older women is one of the biggest issues facing older persons around the world.

1.5. Aim and Objectives of the Study

1.5.1. Aim of the Study

The main aim of the study is to explore and understand vulnerabilities faced by elderly women in KwaSwayimane Area under Umshwathi Local Municipality.

1.5.2. Objectives of the Study

The following are the objectives of the study:

1.5.2.1 To explore the life-stories of elderly women.

1.5.2.2 To explore and discover factors that contributes to vulnerabilities experienced
by elderly women.

1.5.2.3 To explore the coping mechanisms used by elderly women in dealing with their experiences of abuse.

1.5.2.4 To explore gaps in service delivery to elderly women.

1.6. Underlying Assumptions of the Proposed Study

According to Alpaslan et al. (2010), a research hypothesis is the statement created by researchers when they speculate upon the outcome of a research. It is also defined as a

tentative prediction about the nature of the relationship between two or more variables, in this case, elderly person and abuse (Alpaslan et al., 2010).

Therefore, the following hypotheses were formulated to understand the assumptions of the proposed study:

1.6.1 Elderly women who are service users might have untold stories about their

vulnerabilities.

1.6.2 There are several factors that contribute to vulnerabilities experienced by elderly women.

1.6.3 Elderly women might use different coping mechanisms in dealing with their

experiences of abuse.

1.6.4 There might be gaps in service delivery to address vulnerabilities faced by

elderly women.

1.7. Overview of Methodology

A qualitative descriptive design was adopted in this study. Data was collected through semi-structured interviews and analyzed using thematic analysis from a purposive sample of 09 elderly women attending KwaSwayimane Day Care Centre.

1.8. Significance of the Study

According to the Deputy Minister of the Department of Justice and Constitutional Development, Honorable John Jeffery (2014), states that cases of elder abuse have become high and not reported. If reported though, they are frequently withdrawn mainly because of non-attendance of the victims in court.

As a result, the need for this study is to explore and understand vulnerabilities faced by elderly women and to guide authorities when developing policies to consider that the elders are a marginalized group and therefore need to be included in service delivery. The research

findings may assist medical professionals, social workers, caregivers and the government to design new intervention programmes for the victims of elder vulnerabilities.

In addition, the study will also contribute to the body of knowledge on vulnerabilities that predispose the elderly to abuse. This will also add to the research and information currently available on vulnerabilities that predispose the elderly to abuse and suggest further research that will explore the experiences of the elderly who are vulnerable to abuse.

1.9. Definition of Terms

1.9.1. Older person

The Older Persons Act No. 13 of 2006, as it is legislated in a Bill of Rights for the Elderly Persons in South Africa defines an older person as an adult aged 60 years and above. Kallin et al. (2002) as quoted by Phakati (2011) similarly defines an elderly person as an adult aged 60years and above.

1.9.2. Vulnerability

According to Golaz and Rutaremwa (2011), vulnerability means specific threats that would impact in a negative way on the life of a person.

1.9.3. Elder abuse

In South Africa (SA), Section 5 of Annexure B of the Older Persons Act (OPA) Draft Regulations (2007) defines elder abuse as.... ‘a single or repeated act, or lack of appropriate action, which causes harm or distress to an older person, occurring within any relationship where there is an expectation of trust. Harm includes physical, psychological, financial, and material abuse, sexual abuse, as well as neglect, violation of rights, and systematic abuse’.

1.9.3.1. Types of Elder Abuse

Older Persons Act No. 13 of 2006 defines the following types of abuse to which the elderly are vulnerable:

1.9.3.1.1. Physical abuse: Any act that result in injury or death by physical means. For example, slapping, hitting, pushing, cutting, use of any chemical or physical restraints, administering incorrect or excessive medication or any act that causes injury, physical discomfort, over-sedation or death.

1.9.3.1.2. Sexual abuse: Any act that result in exploitation for the purposes of sexual or erotic gratification without their full knowledge, understanding, and consent.

1.9.3.1.3. Psychological, emotional and verbal abuse: A pattern of degrading or humiliating conduct (verbal or non-verbal) which results in impaired psychological and/or emotional functioning. For example, rejection, isolation or oppression, deprivation of affection and cognitive stimulation, name-calling or ridicule, accusations and expectations.

1.9.3.1.4. Financial/Economic abuse or exploitation: The illegal use of an older person's grant, property, valuables, assets or money, without their consent or understanding of the purposes for which the money is being used.

1.9.3.1.5. Neglect: Not providing or withholding care and basic necessities. For example, lack of food, warmth, shelter, clothing, medication, emotional support, stimulation and self-neglect.

1.9.3.1.6. Violation of human rights (system abuse): The denial of fundamental rights such as respect for dignity, personal privacy, freedom of thought, belief, opinion, speech, expression and movement of older people.

1.10. Location of the Study

KwaSwayimane area is about 30km North East of the capital city of Pietermaritzburg. It is located in the District of UMgungundlovu in KwaZulu-Natal, under Umshwathi Local Municipality which has 12 Municipal wards. KwaSwayimane is a rural area that is predominantly occupied by Black Africans.

The study was conducted in KwaSwayimani area. The justification for choosing KwaSwayimani as the research setting is that cases of elder abuse were reported by KZN (MEC) for Social Development, the Honorable Mrs. Weziwe Thusi in the Polity Daily Podcast of 2013 of the seven elderly women who were raped and assaulted, and the four elderly women who were robbed and murdered in the area. Consequently, these incidents prompted the KZN (MEC) for Social Development to build a Day Care Centre in KwaSwayimani to protect the elderly people from vulnerabilities that predispose them to abuse.

1.11. Structure of the thesis

The envisaged chapter divisions are as follows:

1.11.1. Chapter 1: Introduction

This chapter presents the introduction of the study, statement of the problem, motivation for the study and the aim and objectives of the study. It provides the underlying assumptions of the study, the research methodology, and significance of the study, definition of terms, the location and structure of the study.

1.11.2. Chapter 2: Literature Review

This chapter provides extensive and relevant literature globally which broadens our understanding of the study. The problem and identification of the gaps in the literature is also discussed.

1.11.3. Chapter 3: Research Methodology

This chapter covers the research design and methodology utilized in the study. It further includes sampling population, data collection, data analysis in relation to research problem and the objectives of the study.

1.11.4. Chapter 4: Findings of the Study

This chapter presents and discusses the findings.

1.11.5. Chapter 5: Discussions, Recommendations and Conclusion

The chapter looks at the discussion of findings, conclusions of major findings and recommendations. It also outlines the limitations of the study.

1.12. Conclusion

This chapter began with the presenting of the background to the study. This was followed by the presentation of the main themes such as the statement of the problem, motivation for the study, the aim and objectives of the study. Thereafter, it provided the assumptions underlying the study, the research methodology, the significance of the study, definition of key terms, the area location as well as the structure of the study. The next chapter will be chapter 02 which provides in detail the literature review.

CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1. Introduction

This chapter entails a review of the literature. Literature review is a process that involves finding, reading, understanding and forming conclusions about the published research and theories on a particular topic (Phakathi, 2011). In reviewing the literature, the researcher used the existing social science publications, social work thesis, search findings such as Google Scholar, and UKZN library search.

To give a clear context of the study, a review of literature on the domains of vulnerability, and types of elder abuse is presented. Thereafter, literature on the extent of elder abuse in different Provinces in South Africa and a part of Africa, i.e. Tanzania and Kenya is discussed.

Day-care services for the elderly are an important resource and service. Therefore, a review of literature on day-care centres and the services provided through these centres is presented. Moreover, the study participants were recruited from a day-care centre located in KwaSwayimane, therefore this literature gives a contextual understanding to the study.

The relevant legislation about elder abuse is also reviewed in order to locate the study within the appropriate legislative framework. More so, the literature on challenges experienced by elderly women in South Africa as well as the experiences of the elderly in residential facilities is reviewed. Main services required by vulnerable elderly women, and responses to elder abuse are also presented. In line with the focus of the study, the theoretical basis of elder abuse using the ecological systems approach in exploring risk factors contributing to vulnerabilities of elderly women is presented and the conclusion of the chapter.

2.2. Domains of Vulnerability

Schröder-Butterfull and Marianti (2006) distinguish two possible domains that differentiate vulnerable persons or groups from non-vulnerable ones: exposure and coping capacity. 'Exposure' refers to states which would induce a varied probability of encounter or a given

threat. The exposure of a person is based on the individual and household characteristics that define a person ‘at risk’. Among them, economic characteristics such as assets ownership, housing characteristics, employment status as well as remittances flows are commonly mobilized as poor/non-poor indicators. However, exposure is not enough to define vulnerable persons.

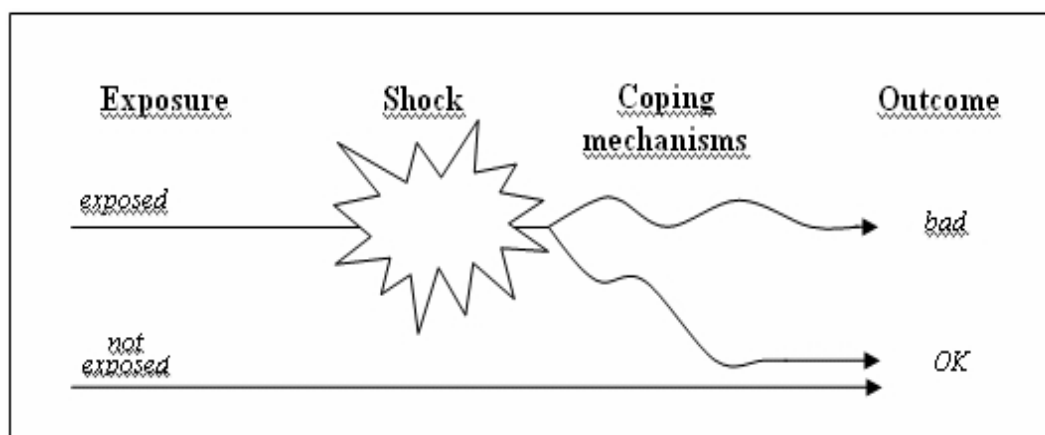


Figure 1: A framework for understanding vulnerability adapted from Schröder-Butterfull and Marianti (2006)

Clough (2010) on the other hand, views vulnerability as a broad term with different meanings in different settings. It is argued that there are some general features to most definitions, but also significant variations. Therefore, Clough (2010) defines social vulnerability and psycho-social vulnerability as follows:

2.2.1. Social vulnerability

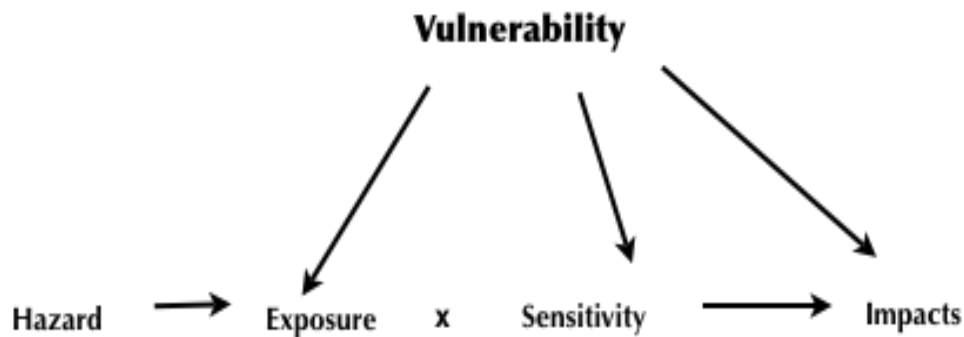
This refers to the inability of people, organizations, and societies to withstand adverse impacts from multiple stress which they are exposed to. It is created through the interaction of social forces and multiple stressors that are resolved through social means. While individuals within a socially vulnerable context may break through the vicious cycle, social vulnerability itself can persist because of structural, i.e. social and political influences that reinforce vulnerability. As with any analysis that asserts the dominance of external structures

on people's lives, there is a danger that people are portrayed as passive victims and the capacity of the individual is underplayed.

2.2.2. Psycho-social vulnerability

It refers to the personal attributes of the person and the social/environmental conditions which predispose the person to a particular risk. He further argues that one way of looking at vulnerability is known as the risk/hazard model. Vulnerability can be assessed by looking at, first, the risk and the degree of exposure to the risk and, secondly, the extent to which individuals or communities are susceptible to that risk.

Figure 2: Risk/hazard model adapted from Clough (2010)



In adopting this model to illustrate what is meant through the research study, elderly persons in hazardous situations face challenges of elder vulnerability which expose them to various types of abuse such as financial, sexual, physical, emotional and systematic abuse that would then sensitize authorities to utilize legislative mandates including Older Persons Act aimed at having a positive impact on their lives through various services that would be rendered by the government and Non-Profit Organizations to make their situation better.

2.3. Statistics of Elder Abuse in South Africa and the Neighbouring Countries

In this section, a general overview of the extent of elder abuse is presented. To that effect, the chapter will critically review literature from both international and local sources from South Africa and neighbouring African countries such as Tanzania and Kenya to be critically discussed.

2.3.1 KwaZulu-Natal Province

The National Council of Provinces (2006) as quoted by Phakathi (2011) asserts that during the year 2003 to 2005, the Commission visited KwaZulu-Natal and conducted workshops on the Older Persons Bill, and the problem of elder abuse was strongly highlighted where participants at these workshops gave examples of abuse such as the general intolerance of the needs and abilities of older persons.

According to the National Council of Provinces (2006) as quoted by Phakathi (2011), older persons also felt that officials did not always deal with them sensitively and that their complaints were often dismissed; there was bad treatment by health officials who complain that older persons are slow and therefore deal with them in an irritated and dismissive manner; there were incidences in which older women are burnt because they are accused of being witches; older persons were victims of crime, and sexual abuse and rape as a result of the spoken 'older persons cleansing myth' in which it is believed that by having sex with an older person one will be cured of HIV/AIDS.

Similar incidents of elderly abuse were also reported by Dr. Karen Buckenham who is a research director at the Centre for Community Justice and Development (CCJD) in Pietermaritzburg in the News 24 on the 17 September 2013 that a 91yearold woman was attacked and repeatedly raped in her home in Mpumuza area in Pietermaritzburg by a 22-year-old man. A 74yearold grandmother was also raped, stabbed in the head and robbed in her flat in Bisley, Pietermaritzburg.

According to the South African newspaper, The Post of 14-18 August 2019, an elderly woman, 79, former Principal of Collegevale Primary School in Overport, Durban, was found lying in the garage of her Mall Castle place home on Monday of the 12 August 2019 by officers from a private security company. She was lying on her back with a piece of cloth wrapped around her face. Her clothing was dishevelled. According to a police source, who asked not to be named, there was blood on her arm, possibly from a stab wound. It also appeared the victim tried to fight off her attacker. KZN SAPS confirmed that a case of murder and robbery was being investigated by Newlands East SAPS. She said the body was found at around 3pm. It is alleged a body of 79year old woman was found lying in her garage with assault wounds to the head and decomposing. The victim was staying alone in her house. Her husband died about three years ago due to an illness, so, she lived alone.

The South African Newspaper, The Natal Witness of the 29 April 2019 also cited another terrible incident that occurred at Efaye area next to KwaSwayimane in New Hanover after a 27-year-old man was due to appear in the New Hanover Magistrates court for assault, repeated rape of a pensioner. The police spokesperson did not respond to allegations made by the family that the police had been slow to act in the matter and had not even bothered to attend the scene of the crime. The police did not even collect perpetrator's underwear and T-shirt as evidence. The pensioner was allegedly attacked after a man broke into her house while she was asleep. The man demanded money and when the victim said she did not have it she was repeatedly raped, throttled, assaulted and forced to perform oral sex. After the incident, the elderly woman was so traumatised and could not walk properly as a result of serious injuries inflicted during the attack. She said the perpetrator managed to enter the house through a window and when she saw him inside the house, she tried to run away but she could not. The woman had been alone in the house when the incident happened.

2.3.2. Mpumalanga Province

In a paper delivered on the 2 December 2014, by the Deputy Minister of Justice and Constitutional Development, the Honourable John Jeffery, member of parliament, in a workshop on the rights of the elderly at Vezubuhle Community Hall, Kwa-Mhlanga in Mpumalanga, he argued that since August 2010, the Department has been collecting statistics on reported cases of abuse of older persons in terms of the Older Persons Act and the number of cases of abuse appear to be increasing. For example, in 2010/2011, there were 48 reported cases of elder abuse in Mpumalanga and 1458 cases countrywide. In 2011/2012, this increased in Mpumalanga to 147 and 1887 nationally. In 2012/2013 the number was the same in Mpumalanga, with 145 cases, but nationally it increased even more, with 2497 cases throughout the country. Of the 145 cases in Mpumalanga, most of the cases involved physical abuse (15 cases), intimidation (15 cases) and “emotional verbal” abuse (13 cases). Other cases include sexual abuse, trespassing, and damage to property. Since 01 April 2014, of the 12 perpetrators in Mpumalanga, 02 have received sentences of imprisonment, with one being sentenced to life imprisonment.

2.3.3. North West Province

In a study conducted in North West Province at Mafikeng in 2014, where a cross-sectional data on 506 elderly people from Mafikeng Local Municipality in South Africa, use was made of the chi-square statistic and the logistic regression model to analyse the data. Overall, 64.3% of men and 60.3% of women experienced elder abuse. Physical abuse was more common among men while emotional, financial and sexual abuses were more common among women. The findings of the study revealed that having no working children, being currently single, living in an elderly couple family, living in rural areas, having a poor self-perception of health and having a disability were significantly associated with elder abuse.

The study concluded therefore that the prevalence of elder abuse is high and common in women than in men, which calls for strategies to prevent abuse of elderly women.

2.3.4 Western Cape Province

According to Ferreira and Lindgren (2008), the South African Medical Research Council in association with the South African Council for the Aged (now Age-in-Action), conducted series of unstructured interviews with older persons in Cape Town to learn of their perceived needs and those of their communities.

However, Ferreira and Lindgren (2008), argued that what emerged surprisingly in interviews, were subjects' perceptions of abuse relating to poor service delivery in the payment of social pensions, exploitation at shops, unsatisfactory health care services, personal safety issues, a loss of respect for elders, having to care for grandchildren, and diverse infrastructural deficits, such as inadequate housing, a lack of sanitation, poor roads, and problems with transportation. The study highlighted that such deficits are perceived by older persons as abusive and discriminatory, thus constituting systemic abuse, and contributing to their marginalization and exclusion, and therefore violating their human rights.

Ferreira and Lindgren (2008) further maintain that at about the same time a qualitative study was again conducted by the South African Medical Research Council, in association with the South African Council for the Aged (now Age-in-Action) among older residents of historically black townships of Cape Town using focus group methodology to establish participants' understanding and experience of elder abuse in their communities and to determine how older persons and their communities may be empowered to prevent the abuse. A range of types of abuse were reported to occur in the participants' social environment and the researchers were able to construct a rudimentary classificatory system for use in this population, which includes i) physical abuse (beatings, shoving); ii) emotional/verbal abuse (discrimination, hurtful words, denigration, intimidation); iii) accusations of witchcraft (brandishment, ostracism, physical danger, seizure of assets); iv) financial abuse (extortion and control of pension money and assets, exploitation and theft of property); v) sexual abuse (incestuous rape, criminal rape); vi) neglect and a lack of respect (loss of respect for elders, withholding affection); and viii) systemic abuse (dehumanizing treatment at health clinics, pension pay points, and government offices).

In the Western Cape, The National Council of Provinces (NCOP, 2006) as quoted by Phakathi (2011) further indicates that the social grant pay, points provide several opportunities for criminals and unscrupulous people to target older persons and abuse them financially. The report indicates that there were many incidents of these stolen pensions being used to fund drug and alcohol addictions. Stories were told of addicts dropping of older persons to collect their pensions, taking their pensions from them and then driving off not caring how the older persons would get home again.

The National Council of Provinces (NCOP, 2006) as quoted by Phakathi (2011) again mentions that a severe lack of affordable accommodation in the Western Cape places the elderly in vulnerable situations. The older person's financial inability to afford a home of their own results in many having to live in situations where they are abused. Some older persons live in situations where family members abuse them personally, emotionally and financially. However, the stress of having to participate in a criminal trial prohibits some older persons from reporting abuse to the police.

2.3.5 Limpopo Province

Phakathi (2011) asserts that in Limpopo, a shocking example of financial abuse was given in a study conducted by the National Council of Provinces (2006). The study revealed that Hawkers sell false medicines to the elderly at pension payout points. It is alleged that Sta-soft was being sold in small bottles for a fee of R350 with the claim that it was an arthritis medicine. Participants spoke of skin medicines that are sold in small tubs at their pension payout points. This 'medicine' is, in fact, Jeyes fluid disinfection.

2.3.6 Eastern Cape Province

In the Eastern Cape, a study conducted by the National Council of Provinces (2006) revealed that older persons are induced into parting with pension money by scam operators of burial schemes. The report states that it was echoed that the elderly were vulnerable targets who were subjected to exploitation in the giving of loans. It was also reported that there is mounting evidence that older persons who receive old age pensions become targets of

financial exploitation by an array of persons and schemes that wish to obtain access to their money.

The study also showed that there are several perpetrators who abuse the elderly to gain access to their pensions. Robbery and physical abuse are also common to make the older person give the money over, exploitation by families Hawkers and loan sharks target the elderly as clients, charging them exorbitant interest rates and they fall victim to corruption and abuse by officials (NCOP, 2006).

2.3.7 Gauteng Province

The findings of the study conducted by Gauteng Department of Social Development in 2007 on the Needs of Older Persons in Wattville, Boipatong, Duduza, and Mohlakeng in the research report for Gauteng Department of Social Development revealed that elderly women require services to deal with the following vulnerabilities they experience:

Greater than 80% of older persons do not have a life-long companion any more due to being widowed, divorced, and separated or some other cause. As a result, they find themselves in a possible emotional void, needing increasingly more support from their remaining family members with whom they mostly stay. Up to 45% of family members neglected their role in supporting the people looking after the older person.

Significantly, 14% of older persons stay in informal, squatter type of accommodation. A quarter of them have no schooling at all, while a further 36% had done some primary school education but not completed it. Most older persons do not possess any skills. The limited skills that are held relate to everyday vocational chores.

There was some significant resistance to an old age home which was associated with some form of confinement and solitude. The older persons desired the comforts offered by the emotional lap of their families, rather than face the wrath of being institutionalized. Although some 40% or less desired an old age home, this was merely on the assumption that they would no longer have to face up to the realities of fending for themselves and their families. Accordingly, a day-care centre, where they could return to their families was a lot more amendable, allowing them to enjoy structured care and recreation without being isolated

further from their families. A retirement village, seen to offer nearly the equivalent of the benefits of being at home while providing infrastructure was also a lot more appealing than the old people's home with over two thirds desiring to stay in it. Its single most important drawback was the associated cost penalty.

Recommendations of the study conducted by Gauteng Department of Social Development (2007). The study though conducted by Gauteng Department of Social Development in 2007, its recommendations can also be applicable to the Province of Kwa Zulu-Natal. It is the researcher's observation that vulnerabilities experienced by elderly women tend to be similar across Provinces in South Africa with similar recommendations proposed by the research study conducted by Gauteng Department of Social Development (2007) which highlighted that:

Overall services for older people should not exist more as fragmentation of largely unknown provisions, but a well-coordinated set of benefits for the elderly in society. A need exists to carefully define what the government can provide, how, where and when it can provide it. Alongside this, a further need was identified by the study to consider upgrading facilities and building new ones, especially in an area where there is none.

The government should carefully integrate the services rendered by caregivers, services providers, community leaders, and formal organizations and associations. A collective plan is needed so that all stakeholders can work together to improve the living conditions of the elderly. The Department needs to embed itself into the various community structures like clinics, social workers, etc. and use this to create and leverage awareness of its older person's services.

More importantly, the Department needs to broaden knowledge of its diverse services. Focus should also be diverted towards preventative strategies than curative ones. Efforts should be made to empower older persons with skills. Create an awareness campaign that will explain how and where to access the services of the Department.

Formal media such as radio and television should be used. Although the Department is considered important its reach is still far too limited and therefore a lot more needs to be

done to extend services for older persons to all the areas. Further, there is a need for inter-departmental interaction to be initiated by the Department of Social Development. This is important because the activities of the different Departments are inter-linked.

2.3.8 Tanzania and Kenya

Witchcraft accusation is reported to be another form of elder abuse in the literature reviewed. According to Maina (2011), belief in witchcraft is strong in most African countries and a range of factors can lead to accusations. Maina (2011) maintains that recent studies have shown that the accusations are often made maliciously and specifically to target poor and vulnerable older persons especially women. He further asserts that these issues have been raised recently in the media in Tanzania. He further argues that killings and abuse of older women as a result of witchcraft accusations are a gross violation of human rights.

Maina (2011) further asserts that in Kenya it was reported in the media that an average of six people was lynched every month in 2009 in Kisii District alone for allegedly practicing witchcraft. It was also estimated that 42 people were killed in three districts in 2008 and 23 older people in three provinces in the first half of 2009. Buckenham (2013) agrees with Maina (2011) that belief in witchcraft is strong in most African countries. He argues that in South Africa, some of the elderly women, particularly those who live in rural areas, report that they live in fear of being accused of witchcraft and the dire consequences that follow. Such older women are often hounded from their home and village, and their assets seized incredibly, by their children or other community members, or even hired thugs. Clotina Kokupima, 80 years –old-granny from Kasulu in Kigoma region quoted from the Citizen Newspaper said, “Women are often accused of practicing witchcraft because they have red eyes because women do the cooking at home and the redness comes from cooking with firewood, not from witchcraft” (The Citizen: Sunday: June 16:2014).

The researcher contends that there are more cases of elder abuse being reported but very few perpetrators are reported, arrested, prosecuted and sentenced. As a result of the availability of these perpetrators in our surroundings and communities, incidents of elder vulnerability will keep on increasing in numbers. This situation not only affects Mpumalanga, but similar

incidents are also perpetrated in KwaZulu-Natal Province especially in areas such as KwaSwayimani where the phenomenon of elder vulnerability was also observed in neighbouring countries.

In drawing parallels and distinctions from Province to Province with assimilation to fully understand and answer the “so what” question for a scholarly argument, it suffices to argue that the elderly women from South African Provinces experience all various forms and types of abuse as defined in the Older Persons Act No. 13 of 2006 such as physical, sexual, psychological, emotional, verbal, and violation of human rights with financial abuse being the most prevalent one. Tanzania and Kenya is having the most incidents of witchcraft than South Africa. However, it is the researcher’s contention therefore that events of witchcraft accusation still exist in South Africa like in other Sub-Saharan countries. This therefore accords the argument expressed by Buckenham (2013) and Maina (2011) that the belief in witchcraft is strong in most African countries.

2.4. A Day Care Centre for the Elderly

Hussein (2010), as quoted by Giles (2010), argues that day-care centres are places considered to have two main functions. Firstly, to enable people to continue living in their own home rather than moving into residential care, and secondly to provide respite for caregivers who tend to be family members living in the home.

Hussein (2010) argues that attendance at day-care centres can promote older adults’ wellbeing and quality of life. Giles (2010) asserts that various studies have identified the positive impact attendance can have on fostering social interactions and reducing social isolation, thus promoting the mental and social well-being of the individual by reducing depression, anxiety and loneliness, and increasing levels of happiness and life satisfaction.

Saliebey (2006) on the other hand views a day-care centre as a place where, according to his strength perspective theory, many older people continue to contribute when the emphasis is on their strengths and on removing barriers to the accomplishment of their goals. The centre also focuses essentially on identifying, mobilizing and respecting the resources, assets,

wisdom and knowledge that every person, group, or community has as well as their potential for transforming their experiences and lives.

Furthermore, Saleeby's (2006) argument of describing a daycare center in that it is a sanctuary for the elderly, reducing the time they spend alone during the day which exposes them to more vulnerability and providing psycho-social support services such as personal, health care, physiotherapy, and occupational therapy services, counseling, meals, social, spiritual and recreational activities to the elderly people who are lacking care of family members during day time. These services also aim to provide elders with optimal rehabilitative care in their locality as well as to relieve the stress of their caregivers. They also avoid premature admission of elders to old age homes.

2.5. Risk Factors associated with Elder Abuse and Neglect

Ananias and Strydom (2014) assert that the ecological systems theory is useful for understanding the risk factors of elder abuse and neglect. They further argue that this theory offers a broader understanding of risk factors for elder abuse as it applies to the elderly person as the victim, the perpetrator, the context of care-giving and the broader societal context including cultural norms and historical disadvantages. Moreover, Schiamberg (2011) suggests that not only one but several risk factors need to be considered when ecological systems theory is applied in understanding risk factors contributing to elder vulnerabilities. However, for the purpose of this study, attention is paid only to the following risk factors in the micro and macro-systems as outlined by Ananias and Strydom (2014) to explore contributing factors to vulnerabilities of elderly women.

2.5.1. Factors contributing to Elder Abuse

The ecological systems theory maintains that factors contributing to the abuse of elderly women include gender, marital status, chronological age, health, dementia/Alzheimer, provocative/ disruptive behaviour, substance abuse, psychological factors and social isolation. These factors are discussed below as follows:

2.5.2. Gender

Studies by Kosberg (1988) as quoted by Schiamberg and Gans (2000) revealed that women are more likely than men to be vulnerable, suggesting that there is a larger proportion of older women than men and that they are more vulnerable to sexual exploitation. Henderson, Varble and Buchanan (2004) as cited by Daichman (2005) argue that although both men and women are victims of elder vulnerability, women are physically weaker and thus more vulnerable to abuse.

2.5.3. Marital Status

A married elder is more likely to be exposed to vulnerability than a divorced or widowed elder. An explanation of this finding is related to the living arrangement and the fact that an older adult who lives with a spouse, or with at least one other person, is obviously at higher risk for potentially abusive interactions than someone living alone. However, Ananias and Strydom (2014) argue differently that older people are vulnerable, irrespective of whether they live with a spouse, a family member or alone.

2.5.4. Chronological Age

The older the person is, the higher the risk of a vulnerable situation. Advanced age is associated with health, physical, and mental impairment. Henderson, Varble and Buchanan (2004) as quoted by Daichman (2005) are in support of this view that the probability of vulnerability increases as people grow older because they become physically and mentally impaired and therefore more dependent.

2.5.5. Health

Elderly people in poor health require a great deal of care and thus place greater demands on family caregivers. Poor health and disability might also reduce the older person's ability to seek help and to defend herself. (Schiamberg and Gans, 2000). Ayalon (2011) as quoted by Ananias and Strydom (2014) asserts that older people with serious, chronic physical health problems are more dependent on their caregiver. This dependence can lead to caregiver stress, which causes elder vulnerability. In contrast, Jayawardena and Liao (2006) as quoted

by Ananias and Strydom (2014) claim that there is no direct link between elder abuse and the physical health condition of the elder person. They view the increased frailty of the elder person as a more precise risk factor for elder vulnerability than chronic health problems.

2.5.6. Dementia/ Alzheimer Disease

According to Schiamberg and Gans (2000), the abusive prevalence of dementia patients is estimated to be higher than that in other groups. This might be related to the provocation behaviour factor, since it is estimated that 57 percent to 60 percent of dementia patients manifest some form of aggressive behaviour, i.e., verbal outbursts and physical threats and or violence. Those behaviours contribute to the risk of elder vulnerability.

2.5.7. Provocative/ Disruptive Behaviour

Overly demanding, ungrateful, and otherwise unpleasant behaviour of the ageing parent might contribute to the risk of elder vulnerability (Schiamberg and Gans, 2000).

2.5.8. Substance Abuse

An older substance abuser is susceptible to abusive behaviours of others because she is less inclined to care properly for herself (Schiamberg and Gans, 2000). Henderson, Varble and Buchanan (2004) as quoted by Daichman (2005) assert that because of substance abuse, the behaviour of the care recipient towards the caregiver may be unpredictable and insensitive, causing negative reactions from the caregiver. They may also be less aware of the quality of the care they receive. Some researchers believe that excessive drinking may trigger psychiatric illnesses. Ananias and Strydom (2014) assert that in the same way, the huge number of over-the-counter drugs and chronic medication taken by many older people could also have an addictive effect which exposes them to vulnerabilities.

2.5.9. Psychological Factors

Depression is a risk factor of vulnerability. Stoicism, i.e. the endurance of pain by the elderly without complaint that leads the aging parent to accept her troubles without seeking relief is another personality trait that puts an elder to vulnerabilities (Ananias and Strydom, 2014). Other vulnerable situations exist when an aging person engages in self-blame and fails to

acknowledge the fact that vulnerability is the fault of the abuser (Schiamberg and Gans, 2000). Henderson, Varble and Buchanan (2004) as quoted by Daichman (2005) on the other hand maintain that depression, anxiety, apathy, self-blaming and excusing the behaviour of family members may cause victims to deny elder vulnerability or to withdraw socially.

2.5.10. Social Isolation

Social isolation of the vulnerable elder person has been suggested as one of the reasons that victims of elder abuse are rarely detected (Schiamberg and Gans, 2000). The implication here is that elderly women who are socially isolated can be far away from support systems in the environment to report cases of vulnerabilities to abuse.

In summary, these factors attest that the older victim of abuse and neglect is thus a person with the following characteristics; an older female, of advanced age, who is abusing alcohol, displays violent or difficult behavior, and suffers from serious physical, cognitive or mental disorder. However, the assumption is that there are other elderly women that do not fall under these categories but are still victimized and neglected. For example, those who subject themselves to self-neglect in terms of refusing to take medication as prescribed and not eating properly due to lack of or the unavailability of close caregivers.

2.6. Factors associated with perpetrators of elder abuse

According to Bergeron (2001) as quoted by Ananias and Strydom (2014) the terms “caregiver” and “perpetrator” have become equivalent in elder abuse work since perpetrators of elder abuse could be an adult child caring for an older relative, or a spouse caring for a frail partner. Even though more empirical evidence is needed, it seems that the adult child rather than the spousal caregiver is more likely to display potentially harmful behaviors towards the older parent. Better understandings of each of these risk factors associated with the caregiver are discussed below as follows:

2.6.1. Gender

Von Heydrich (2009) argues that there are contradictory findings on the gender of the perpetrator and elder abuse. He asserts that both men and women could be perpetrators of elder abuse.

2.6.2. Chronological age

Von Heydrich (2009) also maintains that there are contradictory findings on age as a risk factor for elder abuse. Rahman and Gaafary (2012) as quoted by Ananias and Strydom (2014) argue that younger caregivers are more likely to commit acts of elder abuse and neglect than older caregivers. It is my opinion that the situation is also applicable to the South African context as the elderly are mostly being abused by their grandchildren who are taking care of them. The abuse can be financially as in the case where the social grant of the elderly is misused by younger caregivers who buy luxurious items for themselves.

2.6.3. Psychological and emotional problems of the caregiver

According to Penhale (2010), some caregivers suffer from physical and mental illnesses have developmental difficulties or are themselves in advanced age with dementia. He is of the opinion that such caregivers may have good intentions but are not competent caregivers because of their inability to provide proper care or to understand the consequences of poor care (Penhale, 2010).

2.6.4. Substance abuse by the caregiver

Jayawardena and Liao (2006) as quoted by Ananias and Strydom (2014) maintain that caregivers with substance abuse problems make inappropriate decisions around their caregiving role, and may also misuse the finances of the older person, since buying alcohol will be the priority instead of caring for the older person. He further asserts that the perpetrator of elder abuse and neglect could, therefore, be a male or female person, who suffers from a psychological or emotional problem, and is a substance abuser.

In concluding, the perpetrator of elder abuse and neglect could, therefore, be a male or female person, who suffers from a psychological or emotional problem and is a substance abuser.

2.7. The Context of Care-giving

The interaction between the older person and the caregiver within the care-giving context also presents specific risk factors. They are discussed below as lack of caregiver experience and reluctance, dependency, living arrangements, history of abuse in the family, employment status and financial resources, social isolation and lack of formal support.

2.7.1. Lack of caregiver experience and reluctance

Kravitz (2006) argues that not all caregivers have experience in caring for an older person since some people are forced by poor socio-economic circumstances or the need for care of an older family member and become caregivers against their will. He continues to state that caregivers may have feelings of inadequacy and hostility because they lack experience in caregiving. He asserts furthermore that, caregivers might find it difficult to make financial, social, emotional, physical or mental sacrifices because of care-giving. He concludes that reluctance in the caregiver will also increase the feelings of incompetence regarding caregiving on the part of the caregiver, which may lead to elder abuse.

2.7.2. Dependency

According to Ananias and Strydom (2014) other authors suggest that abuse is likely to occur when the victim (elderly woman) is dependent on the abuser (caregiver). If the abuser is dependent on the victim, vulnerability arises out of the abuser's resentment over his or her powerlessness, leading him/ her to the employment of the resources of control and violence. Ananias and Strydom (2014) further maintain that society does not expect an adult caregiver to be dependent on the older person, but the caregiver may have feelings of discomfort, frustration and anger, which may lead to antisocial abusive behaviour.

2.7.3. Living Arrangements

Pillemer and Finkelhor (1988) as cited by Schiamberg and Gans (2000) maintain that the highest risk is for those elders living with a spouse and at least one child. The second group is those living with a child only, and then those living with a spouse. Elders who live alone are less at risk. However, this is not always the case especially in most rural areas like KwaSwayimane in KwaZulu-Natal where it was reported that elderly women living alone are also victimized through housebreakings and some sexually abused.

It is a common experience that the elderly who live alone are at high risk. This can be also argued especially from social work perspective where the elderly who live alone are perceived as vulnerable in need of constant support and living alone can be detrimental and pose possible ailments that may require extra help and support. Overcrowded living spaces and lack of privacy are associated with intra-family conflict. Thus, shared living arrangements provide a greater opportunity for conflict and tension, which might lead to elder vulnerability. For example, in a family where the elderly is living with her grandchildren, the researcher has observed a situation where the elder's pension money is stolen by grandchildren.

In other situations, the elderly is forced to buy food for them and even pay schoolfees for them with her pension money while her basic needs are neglected. In this case, the elderly is subjected to financial abuse which leads to a family conflict when she starts raising her concerns. Her concerns will be taken for granted that she gets mentally confused.

2.7.4. History of Abuse in the Family

Elder abuse is more common in families with established lifelong patterns of violent behaviour (Schiamberg and Gans 2000). Henderson et al (2004) as quoted by Daichman (2005) are also of the same viewpoint that family conflict such as a history of harsh discipline, child abuse, power struggles, personality differences, or weak communication contribute to elder vulnerability. It is a common experience in some families which suggests a direct cycle of abuse when a formerly abused child strikes out at his or her abuser parent when the parent is aging. It is also assumed that some people would always think that their

parents are not perfect as they may have committed some acts that could have offended them badly. When they have grown up, they will get their revenge.

2.7.5. Employment Status and Financial Resources

According to Schiamberg and Gans (2000), economic pressure and lack of financial resources to care for the dependent elder may foster resentment. This resentment might affect the quality of care as well as lead to elder vulnerability.

2.7.6. Social Isolation

The lack of social support from family members, friends, and associates has been linked with abusive behaviour towards older adults in the context of caregiving. (Schiamberg and Gans, 2000).

2.7.7. Lack of Formal Support

Schiamberg and Gans (2000) maintain that caregivers may be stressed and burdened as a result of caregiving activities. According to them, one effective way to prevent elder abuse or vulnerability is to prevent caregivers' stress. As a consequence, they agree that a wide range of programs aimed at providing support for families have been developed. These programs include in-home respite, support groups and household help. In South Africa, especially where the study will be located, such programmes are not available, and if available are very limited because of the area which is very rural. Another viewpoint they expressed is the lack of support and interaction with others on the part of the caregivers both in formal and informal settings may contribute to the risk of elder abuse and vulnerability.

In summing up, the care-giving context that could place older people at risk of elder abuse and neglect thus include the inexperienced or reluctant caregiver, with an inadequate formal and informal support system, a history of dysfunctional relationships between the caregiver and care recipient, interdependency between the caregiver and care recipient, caregiver stress, financial difficulties, and co-resident living arrangements between the caregiver and care recipient.

2.8. Broader Societal Risk Factors of Elder Abuse and Neglect

Social-contextual factors which contribute to elder abuse are the following:

2.8.1. Stereotyping

The portrayal of older people as frail, weak and dependent may increase abuse World Health Organization (WHO, 2011).

2.8.2. Ageism

According to Louw (2008) discrimination against people based on age, without considering their individual talents and capacities may take place. Ageism becomes visible in myths, intergenerational conflicts and the glorification of youth. It demonstrates people's negative attitudes towards older persons and the ageing process. Daichman (2005) supports this view by saying the result is that the elderly are devalued, not respected and marginalized by society.

2.8.3. Migration

Migration of young people and the erosion of family bonds is a factor according to World Health Organization (WHO, 2011).

2.8.4. Inheritance laws

When the husband of an older woman dies, she may not inherit the property. It is seized by the family and she is exposed to abandonment and poverty as it is argued by the World Health Organization (WHO, 2011).

In summary, broader societal risk factors make older people vulnerable to elder abuse and neglect. These include stereotyping, ageism, migration and inheritance laws.

2.9. Legislation and the Protection of the Vulnerable Elderly Women

In South Africa, there are various pieces of legislation that promote human rights and protect persons whose rights have been violated. These laws include the Constitution of SA which in Section 9(3) states that a person may not discriminate directly or indirectly against anyone on

certain grounds, including age. The Bill of Rights enshrines the rights of all people and affirms the democratic values of human dignity, equality, and freedom. Domestic Violence Act 116 of 1998 aims to protect any victim of domestic violence through the issuing of the Protection Order on behalf of the abused person. Criminal Procedures Act 51 of 1997 seek to prosecute the perpetrators of abuse in a court of law. Sexual Offences Act 23 of 1957 aims to protect the victims against any acts of sexual abuse. Social Security Act 59 of 1992 aims to provide social grants to alleviate the poverty of the older person.

In terms of Section 25 of the Older Persons Act, 13 of 2006, an older person may require care and protection when her income including grant, and possessions have been taken away without her consent and consequently suffers economic loss, and the older person has been removed or unlawfully evicted from property owned or occupied by her, neglected or abandoned without visible means of support and care, lives or begs on the street and begs for a living, abuses alcohol or drugs and is at risk due to lack of support of treatment, lives in circumstances that cause or is conducive to seduction, abduction, and sexual exploitation, lives or is exposed to circumstances that may harm an older person physically or mentally or lives in a state of physical, mental or social neglect, including self-neglect.

Phakathi (2011) is of the view that the Older Persons Act 13 of 2006 aims to protect the elderly from all forms of abuse, including accusations of witchcraft. The Act provides for anyone caring for the elderly to take steps to ensure their safety and the compulsory notification of elder abuse and neglect. Everyone including health care professionals who examine attends to an elderly and suspects that the elderly person has been abused, shall immediately notify the Director-General of the Department of Social Development.

Furthermore, The Department of Social Development issued the ‘Protocol on Management of Elder Abuse to serve as guidelines for government officials, NGOs, and communities in their quest to protect and empower the older persons against abuse and neglect. The Protocol makes it clear that prevention is everybody’s responsibility and an interdisciplinary approach is necessary (Department of Social Development, 2010). Regrettably, some of the prevention strategies are unavailable to many of the most vulnerable because of a lack of financial resources.

Mariah (2010), as quoted by Daichman (2005) has suggested living independently and caregiving as other measures to protect elderly women from vulnerabilities. These measures are discussed in detail below:

2.9.1 Living Independently

Elderly women living independently should make their homes safer by carrying a panic button around the neck, install burglar bars, security gates, and sensor lights, have dogs on the property, close security gates diligently and maintain good contact with the neighbours and never employ workers from the street. To prevent robberies on pension pay-out days, the elderly should open bank accounts. They should become members of a daycare centre where they are cared for emotionally and physically, enjoy socialization and experience meaning and purpose in life through activities. Moreover, abuse can be detected more easily. With regards to financial independence which largely eliminates the possibility of abuse and neglect, they should, therefore, start early to provide for their retirement.

2.9.2 Care-giving

Family members or professional people need to receive training in order to handle care recipients with dementia or Alzheimer's disease, because these patients often resist help or act aggressively. Staff members should watch their caregivers for signs of substance abuse, psychological problems, stress, depression, and anger. The working conditions of the caregivers should be improved to ensure job satisfaction. If the caregiver is a family member, other family members should support him or her and arrange that they are regularly relieved from care-giving responsibilities. Taking the care recipient to a day-care centre may alleviate the stress of the family caregiver.

2.9.3 Stereotyping and Ageism

Lowenstein (2011) as quoted by Daichman (2005) argue that elder abuse can only be prevented if the core problems in society are addressed, like the breakdown in moral and family values, the lack of respect for the elderly, the lack of respect for the sanctity of life,

ageism and stereotyping. To address these core problems, the church, education system, media, and government should support each other and work together.

2.9.4 Church

It has the platform to address ageism and to restore family values and family bonds. The church should speak out against evils in the socio-political, economic and cultural spheres.

2.9.5 Education system

Society needs to be made aware of the ageing process and that nobody will escape it. Treating the elderly with respect and human dignity should also be included in the educational curriculum.

2.9.6 Media

Ageing should be portrayed in a positive manner. This can break stereotypes down.

2.9.7 Government

Expanding welfare grants, ensuring accessible health care, providing more care facilities for the elderly and making affordable housing available must receive attention.

2.10. Challenges Experienced by Elderly Women

2.10.1 Research on Elder Abuse in South Africa- Perceptions and Experiences of the Elderly

2.10.1.1 Experiences of the Older Persons in Residential Facilities

Radka and Ivanová (2009) argue that based on their research study conducted in 2009 in Czech Republic, there is abuse of clients in institutions for elderly people, especially psychological and physical abuse, and neglect. Their study showed that employees' rudeness is not actively premeditated, but rather stems from work that is extremely stressful because of understaffing, a lack of time for individualized care, interpersonal conflict and aggression by certain residents or their relatives. They further argue that participants from all groups who took part in their research had experiences with psychological and verbal abuse. They

primarily pointed out threats, yelling, verbal assault, patronizing behaviour, or the use of improper and humiliating language. They further argue that the financial abuse of residents was also apparent. An example was an improper appropriation of funds during the procedure to return a resident's belongings to the family, or improper acceptance of a gift by the institution, often from a 'demented' client who received no visits.

Radka and Ivanová (2009) further maintain that based on their research study conducted in 2009 in Czech Republic, participants perceived the violation of residents' rights most often as restriction of movement, not being able to make their own decisions and take part in their care, disregard for their privacy, and demeaning their dignity, mainly by infantilization. Therefore, it can be concluded by arguing that the problem of elder vulnerability can be found not only within families or informal settings but in registered residential facilities as well. This is against Chapter 5 of the South African Older Persons Act 13 of 2006 which aims to protect older persons against any forms of abuse in residential facilities usually referred to as Old Age Homes.

In bringing South African experiences on this aspect to align my argument with relevant content of the research study, it is worth mentioning that in one of the homes in Pietermaritzburg, residents with various diseases like skin rash, ringworms, are made to share one bath towel. Another experience found is that the residents find themselves being dumped by their families. It is also an experience that the residents get bullied for messing up the bed, while he\she is not offered any government nappies and at the same time they are not able to go to the toilet on their own. Sometimes residents go to bed without getting a bath, because of the attitude of some staff.

2.10.1.2. Barriers to Seeking Help by Elderly Women

According to Newman et al. (2013), a study conducted by the Department of Economic and Social Affairs of the United Nations, New York, barriers to seeking help by abused older women may be both internal (feelings of hopelessness and concern for the abuser, for example), or external, such as lack of services specifically designed for older women victims' needs.

2.10.1.2.1. External Barriers

Hightower et al (2006) as quoted in the study conducted by the Department of Economic and Social Affairs of the United Nations, New York, (2013) argue that external barriers to abused elderly women seeking and getting help included the fear that adult children and other family members would reject them, a concern that the church would not be supportive, a concern that law enforcement and the courts would not provide needed assistance and would possibly cause more harm by not protecting them and therefore, exposing them to more violence.

2.10.1.2.2. Internal Barriers

Buchbinder and Winterstein (2003) as quoted in the study conducted by the Department of Economic and Social Affairs of the United Nations, New York, (2013) maintained that internal barriers were identified as the self-perception of powerlessness, self-blame, the felt need to keep the abuse secret, the felt need to protect family members such as children by keeping the family intact, protecting income and resources, and the fear of not being believed. Finally, there were concerns expressed that their batterers were sick and needed their help.

2.10.1.2.3. Health Issues

McGarry and Simpson (2011) as quoted in a study conducted by the Department of Economic and Social Affairs of the United Nations, New York. (2013) conducted in-depth interviews with women aged between 63 and 79 years old who had been subjected to domestic violence. They found that older abused women faced an increased risk of psychological problems like panic attacks and acute anxiety. Older abused women subjects reported feeling frustration, anger, helplessness, hopelessness, and low self-esteem as negative mental health consequences of family relationships. In the same study conducted by the Department of Economic and Social Affairs of the United Nations, New York. (2013) Hightower, et al (2006) was quoted arguing that abuse of the elderly had a negative health impact such as depression, fatigue, anxiety and confusion, irritable bowel syndrome and ulcers.

2.10.1.2.4. Anxiety

According to Byers, Yaffe et al (2010) as cited by Michael B. in Social Work Today Vol. 13; No. 4 P.10, anxiety disorders are the most prevalent mental health conditions, and in any given year, about 10% of adults aged 65 and older experience a diagnosable anxiety disorder.

Until recently research on anxiety disorders among older persons was limited by lack of information because many of these disorders have gone undetected and untreated. While the state of anxiety is an ordinary response to a threat or danger, excessive anxiety that causes distress or interferes with daily life is not a normal part of the ageing process.

Anxiety disorders are not easy to identify because they often are exacerbations of normal worries. Anxious people may overeat to calm themselves and subsequently gain weight or they may skip meals and lose weight, may sleep to avoid their fears or stay awake to avoid bad dreams, may find fewer activities pleasurable as they become more fearful, may stay at home to avoid their fears, and may abuse alcohol and drugs to feel less scared. Elderly women may also suffer from similar symptoms of anxiety disorders if exposed to excessive and persistent abuse.

Byers, Yaffe et al (2010) as cited by Michael B. in Social Work Today Vol. 13; No. 4 P.10 further argue that another major sign of anxiety and or depressive disorder experienced as a result of elder abuse is social isolation which does not mean living alone, but means being largely cut off from the outside world. Many people who live alone have friends, go out and have active interests. People who are socially isolated may have lost their relationships with family and friends. Many people are isolated because they are too depressed to do what would help those most. They then become increasingly anxious and or depressed because of their isolation.

2.10.1.3 Socio-Economic, Health and Educational Challenges Experienced by the

Elderly Women

In August 2004, South Africa hosted an Africa conference on Ageing. The aim of the conference was to develop an African framework for the implementation of the Madrid Plan

of Action. The conference was attended by representatives from African countries, Non-Government Organizations (NGOs), Private Sector, Institutions of Higher Learning and older persons. This served as a basis for the African and the South African Plan of Action. The situation analysis of the conference highlighted a variety of other challenges that the older persons experience as follows:

- Older persons are seldom given the opportunity to participate in some critical issues such as the development of policies and legislation about the services that they need or receive. Their voice, even though it is a voice of experience and wisdom is rarely considered.
- Older persons are engaged in informal employment, either as hawkers, childminders and domestic workers. They also volunteer as caregivers for frail older persons and other persons suffering from chronic diseases. However, there is little or no recognition for their contribution neither is such effort recognized as work. No financial equivalent is placed on the work that they do.
- Older persons live in rural areas without basic services, thus increasing their vulnerability. Most of these older persons are women. Agricultural pursuits appear to be the only opportunity that they engage in. No information or resources are available to the older person to increase their access to a host of other opportunities.
- Many older persons experience a sense of dis-empowerment. They feel isolated, discarded, and not useful to society. This is because of how ageing is perceived in the country. The worth of the older person is measured on an economic basis, and once they retire, it appears as though they are worthless citizens.
- Older persons did not have the opportunity to be educated, which increases their vulnerability as they have to rely on others for information. Educational programmes

have been put in place to ensure that basic education as a right is made available to all those who need it. However, there is still a challenge for older persons to access such programmes.

The government has made efforts to support poverty relief programmes that target older persons. These programmes are insufficient to cater for all older persons who are vulnerable and are not sustainable.

The Department of Health provides free health care services to older persons as they are part of the vulnerable groups. There is still a challenge of access to these services especially in rural areas due to lack of appropriate transport and information on the availability of the service.

There is an increase in the number of older persons who are infected with HIV and Aids. In the past, older persons were affected by the disease through their children and grandchildren. The exposure to the risk of infection as they provide care to their sick and children is of great concern. Yet current awareness and preventative programmes still focus on the youth and do not target older persons.

Older persons are not prioritized in the allocation of houses. They are treated like any other citizen. There is also no policy framework that guides housing provision for older persons. The new housing stock is built according to the general plan and does not take into consideration the specific need of older persons, who want to live on their own with very little assistance. There is however provision made within the housing legislation for people with special needs, this information is not made accessible to older persons, with the result that they accept a house that does not meet ageing needs.

Public transport in the country has not reached an acceptable standard. Where there is some sort of system in place, this usually does not take the needs of older persons into account. Older persons, just like the general public have to rely on buses and taxis which are not suitable for the transportation of older persons especially those with disabilities. There are no

policies in place that ensure that transport for older persons is subsidized so that they can enjoy the freedom to go where they want and at times suitable to them.

Many older persons are volunteers at pay points, assisting with social security pay-out, taking care of orphans, people with disabilities, other frail older persons and their sick children. Older persons are carrying out these responsibilities with little or no support. Their efforts are also not recognized.

2.11. Services Required by Vulnerable Elderly Women

Elderly women require services after being exposed to vulnerable situations such as abuse. There are a few services that can be rendered to them. According to Straka and Montminy (2006) as quoted in the study conducted by the Department of Economic and Social Affairs of the United Nations, New York (2013), abused older women require services such as the practical information about how to leave abusive situations, how to access pensions and other benefits, how to manage personal financial issues, how to obtain a divorce and where to find places of safety or available housing.

2.12. Responses to Elderly Abuse and Neglect of Elderly Women

In responding to incidents of elder abuse and neglect, it is important to agree with Smith et al. (2011) who argue among other things that, support group interventions with caregivers is a proper intervention to reduce elder abuse and neglect (Smith et al, 2011). They further maintain that support group interventions with informal caregivers of older people can be of great value by reducing the care-giving burden by linking caregivers with community resources. Support groups also engage caregivers in social activities that can reduce isolation, and they provide platforms for caregivers to exchange skills and share coping strategies among caregivers (Smith et al, 2011).

2.13. Theoretical Framework of Elder Abuse

2.13.1 Ecological Systems Theory

2.13.1.1. Historical origin of the theory and the founder.

According to Roberto and Teaster (2017), Urie Bronfenbrenner's ecological systems theory was founded in 1979.

2.13.1.2. Theory's main propositions or principles.

It postulates that every person is influenced by different environmental systems such as the micro, meso, exo and macro systems (Roberto and Teaster 2017). Individuals are embedded in a series of environmental systems that interact with one another and with the individual to influence personal development and life experiences. (Roberto and Teaster 2017)

2.13.1.3. Theory's relevance in social work practice and research.

According to Pardeck, (1988), the theory suggest that the primary premise explaining human problems is derived from the complex inter-play of psychological, social, economic, political and physical forces. It shifts the focus of treatment from the client's personality and behavioral make-up to the client's inter-relationship with the family, community, and other systems. Problem of clients are not a result of individual pathology, but rather a product of a malfunctioning ecosystem.

The theory has four environmental systems which according to Roberto and Teaster (2017) are as follows:

2.13.1.1 The Micro System

This is the innermost system whereby a person's immediate surroundings and relationships. Authors maintain that in the micro-system for example, the elderly are influenced by people that she has direct contact with like family members or caregivers in KwaSwayimani (Roberto and Teaster 2017).

2.13.1.2 The Meso-system

This is where a person's microsystem structures interconnect and assert influence upon one another. In the meso-system, the elderly is influenced by the experiences she has with the people in the micro-system. For example, the elderly may be withdrawn from her peers at a day-care centre because she is experiencing different forms of abuse at home (Roberto and Teaster 2017).

2.13.1.3 The Exo-system

It represents the third layer of the model, which is external to the individual but affects her through interactions with structures in the microsystem. In the exo-system, the elderly for example, is influenced by actions or people that do not have an active role in her life. This includes decisions that have bearing on the person but in which they have no participation in the decision-making process. An example would be an elderly affected by a caregiver receiving a promotion at work or losing the job which then makes the elderly use her pension grant to maintain all family members. The situation is prevalent in rural areas like KwaSwayimani as well (Roberto and Teaster 2017).

2.13.1.4 The Macro-system

According to Roberto and Teaster (2017), this is the outermost layer which is comprised of cultural values, customs, and laws that have a cascading influence throughout interactions with all of the other systems. For example, the elderly may experience systematic abuse such as unfair political policies where their needs are not attended to by some government officials also in areas like KwaSwayimani.

The theory proposed by Urie Bronfenbrenner summarises the systems in the below table as follows:

Table 1: Summary of Urie Bronfenbrenner's Ecological Systems Theory

System	Explanation
Micro-system	The immediate contexts in which the individual participates and the people in these contexts are in direct contact with the individual, e.g. family members or care-givers.
Meso-system	Influences between members of the micro-systems, e.g. day-care centre and family relationships
Exo-system	External influences on the individual from systems not directly related to or external to the micro-system, e.g. policy and legislation.
Macro-system	Broader cultural and social influences, e.g. social and economic status

Adapted from Journal of Elder Abuse and Neglect 23(1), 75-88, 2010

2.13.2. Strengths and Weaknesses of Ecological Systems Theory

The strength of the ecological systems theory according to many authors is that it considers the interactions that take place across several interrelated systems and how they adapt to one another. For example, the elder in the micro-system may experience financial abuse by maintaining all family members including grand children with her pension monies. The theory asserts that the behaviour of an individual, in this case, abused elder person, cannot be understood without reference to the other systems to which she belongs.

Therefore, given these critical views on this theory make it clear why the researcher is choosing to use it for his study presently. Ananias and Strydom (2014) further add that this theory offers a better explanation of the complexity of the problem and in this study of elder vulnerability in terms of the individual and the influence of the environment.

Regarding the weaknesses of this theory, many authors agree that the weakness of this theory is that it is not prescriptive, i.e. it does not tell us what to do. It is a generalized theory hard to apply to specific situations. It includes too much and does not place some emphasis on what is most important.

2.14. Conclusion

This chapter presented the reviewed literature for this study. The main themes reviewed were the domains of vulnerability, types of elder abuse, statistics of elder abuse in South Africa and neighbouring countries, a day-care centre for the elderly people, legislation and the protection of the vulnerable elderly women, challenges experienced by elderly women, main services required by vulnerable elderly women, responses to elder abuse, and the theoretical framework. The next chapter will be chapter 03 on the research methodology.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1. Introduction

This chapter provides details of the processes that were engaged in when the study was conducted. The research paradigm, research design, sampling strategies, data collection instrument, method of data analysis, ethical considerations and trustworthiness will be discussed.

3.2. Research Paradigm

According to Hennik (2011), a qualitative research method seeks to examine individual lives, their stories and their functioning or culture in their conduct interaction and social movement. Lester (1999) adds that a qualitative approach enables the researcher to attain rich, detailed information and perceptions from participants and to interpret and analyze people's experiences and actions.

The study aims to explore the vulnerabilities of elderly women in the area of KwaSwayimane. To achieve this aim, the study adopted a qualitative research method as this method is the most appropriate for exploring the experiences and obtaining descriptive information on vulnerabilities faced by elderly women.

3.3. Research Design

A qualitative, descriptive design was adopted in this study because according to Alpaslan et al. (2010) the descriptive design allows the researcher to interact with participants. It is suitable to describe their experiences and how they experience, interpret and structure their world. Alpaslan et al. (2010) further assert that the exploratory design investigates the "what" of the matter and it aims to determine what further research can be done about the topic. Descombe (2010) maintains that research design involves design regarding what topic is to be studied among what population, with what research method and for what purpose. More so, design is a process of focusing the perspective for the purpose of a study (Descombe, 2010).

3.4. Sampling Strategies

The sampling strategy used in this study is purposive sampling. Lesia (2011) states that purposive sampling simply means that participants are selected because of some defining characteristics that make them the holders of the data needed for the study. Lesia (2011) further states that sampling involves selecting units of analysis, e.g. people, groups, and setting in a manner that maximize the research ability to answer the research questions in the study. In this regard, the unit of analysis selected was a group of elderly women, not just any, but those who had detailed information on elder vulnerability or exposed to it in one way or the other.

3.4.1 Processes followed when selecting a sample

Gate-keeper's permission letter to conduct the study with elderly women was requested and received from the KZN Head of the Department of Social Development. An appointment was then made with the Centre Managers to explain the purpose of the study and its significance.

Thereafter, a preliminary visit was conducted at KwaSwayimane Day Care Centre. The researcher met staff members and social workers/ case managers allocated to deal with cases of the elderly. The researcher was then granted permission to meet a group of elderly women including one elderly male attending at the Centre for their daily activities. The researcher introduced himself and established an initial rapport with the group and then explained to them the purpose of the study and its importance and that those who are willing to partake in the research study must do so voluntarily.

A week later and with the assistance of social workers/ case-managers who deal with case files of the elderly, a group of 09 elderly women were selected for interviews using purposive sampling. Lesia (2011) asserts that purposive sampling simply means that participants are selected because of some defining characteristics that make them the holders of the data needed for the study.

3.4.2 Sample Criteria

The criteria for selecting a sample focused on elderly women from the ages of 60 upwards. Older Persons Act 13 (2006) defines a female older person as a person 60 years of age or older. Participants selected were those willing to be interviewed and able to answer questions during individual interviews. Those who were frail and suffering from dementia were not selected due to their mental status. Purposive sampling ensured participants did not have a significant cognitive impairment or speech-related problem. This was necessary in order to obtain in-depth data that would best reflect the experiences of vulnerable older persons.

3.4.3 Sample Size

The sample consisted of (20) elderly women attending at KwaSwayimane Day Care Centre selected with the aid of social workers/ case-managers of the elderly people attending at the facility. The reason for selecting a sample of 20 was because the participants attending at the centre were more than 30 and the researcher wanted to use a sample consisting of more than half the participants. A sample of 20 was justified by the fact that according to Clarke and Braun (2013), a sample size of more than 06 to reach data saturation is recommended in qualitative studies. As a result, the researcher continued with probing with a sample of 09 participants until the researcher felt that he had reached what Legard et al (2003) call saturation, a full understanding of the participants' perspective.

Only 9 participants were interviewed as 11 of them could not avail themselves for interviews as they had to collect their pension grants at SASSA office, some had to attend a funeral in the neighbourhood to conform to cultural issues for mourning purposes, and others had serious health challenges. Also, the researcher could not come back as he did not want to repeat interviews and contaminate research questions.

3.5 Data Collection Instrument

Before conducting interviews with the selected elderly people, the purpose and topic of the research were once more explained to individual participants (elderly women) so that each could understand why they have been selected. Participants were also informed about the

keeping of their data, who will have access to it, what it will be used for, and how long it will be stored.

However, during the data collection process, the researcher was mindful of the fact that elder abuse is a sensitive topic which could negatively affect the process of data collection. Gender sensitivity or biases that exist in dealing with confidential matters especially because the researcher was a stranger and a male official from the Department of Social Development were also taken into consideration. This accords the view expressed by Winchester (1996) that power and gender relations between interviewer and interviewee can be very unequal.

In dealing with the challenges of gender sensitivity and power and gender relations, the researcher adopted what Winchester (1996) called emphatic approach to interviewing where the interviewer/ researcher became non-argumentative, supportive and understanding. This further was compounded by the researcher aspiring and subscribing to the ethical social work principle of good communication by putting participants at ease when data was collected.

The researcher also adopted the participatory model adapted by Oakley (1981) from the feminist theory wherein the relationship between the researcher and the participants being elderly women was non-hierarchical, non-authoritarian, non-exploitative and non-manipulative.

Data was collected using semi-structured interview schedules. Semi-structured interview schedules were used instead of questionnaires because some elderly women had challenges reading and writing properly, there was an issue of time constraints on the part of the researcher as he was a full time employee of the Department of Social Development and participants were only attending at the Centre from 9h00 to 12h00. The topic was sensitive and the researcher did not want to bring back the issue of re-traumatization.

Also, interview schedules were used because according to Edwards and Holland (2013) they are widely used in qualitative research allowing new ideas to be brought up during the interview as a result of what the interviewee says. The interviewer in a semi-structured interview generally has a framework of themes to be explored (Edwards and Holland, 2013). Semi-structured interview-schedules consisting of both closed and open-ended questions help

in eliciting more information from the participant. Phillips (1996) asserts that closed-ended questions are those that limit the respondent to a choice among specific alternatives while open-ended questions require that the respondent relies on his/her own words.

The participants were interviewed in a private room at the facility to capture responses in the most naturalistic setting congruent with the study's research questions. All interviews began by collecting demographic information which helped put the participants at ease. The interviews were audio-taped with their informed consent to aid full engagement with them and lasted approximately 45 minutes each.

Questions in the semi-structured interview-schedules included telling about their lives as Senior Citizens in KwaSwayimane, what personal challenges they experience, how these challenges affect their lives in general, defining and sharing their perceptions on vulnerability in terms of safety and fear and what they suggest are the services required by the elderly in their area. It was challenging at times not to be too led by the questions, especially with participants who are now old, but attempts were according to Smith et al. (2009) as quoted by Giles (2014) made to gently probe rather than be too explicit.

3.6 Methods of Data Analysis

According to Hancock (2002), data analysis involves summarizing the mass data collected and presenting the results in a way that communicates the most important features. In this study, data was presented, analyzed and interpreted using themes. Themes were supported with quotes to ensure they were appropriately evidenced and grounded in the data. Terre Blanche et al (2006) ascertain that qualitative data analysis incorporates 5 steps namely: Familiarization and immersion, inducing themes, coding, elaboration and interpretation, and checking.

3.6.1 Familiarization and Immersion

Terre Blanche et al. (2006) recognize that after completion of data collection, the research analysis should not be delayed. Immediately after collecting data on the experiences of elderly women, data was transcribed and translated with the help of a mother-tongue speaker from the neighborhood who speaks isiZulu very fluently. Data familiarization and immersion

was done by the researcher by re-reading the text a few times over and making notes and summaries.

3.6.2 Inducing Themes

According to Terre Blanche et al. (2006) inducing themes means inferring general rules from specific instances. Known as a bottom-up approach the research first tried to use the language of the participants rather than abstract theoretical language to ensure that themes arose naturally from data and had a bearing on the research questions aimed at exploring vulnerabilities experienced by the elderly women.

3.6.3 Coding

Coding means breaking up the data in analytically relevant ways. Terre Blanche et al. (2006). During the activity of developing themes, the researcher was also coding data by marking different sections of the data as instances relevant to the to one or more of the themes by coding a line, a sentence or a paragraph containing data that pertains to the themes under consideration.

The information that was relevant to the research questions was grouped into themes. The information that was shared from the participants was examined and similar ideas and patterns were colour coded. Themes that appeared similar from participants were shaped into the same colour, each theme had a different colour. This resonates with (King, 2003) who acknowledged that thematic analysis is understood as analyzing information according to the themes that arise from data, and it also permits the identification of themes and patterns. Clarke (2006) additionally argues that thematic analysis is described as the procedure whereby the information is recognized and analyzed resulting in the identification of patterns.

3.6.4 Elaboration

Terre Blanche et al. (2006) assert that exploring themes more closely is called elaboration. This process helped the researcher to explore themes more closely by bringing the stories of elderly women that were far away from each other. This process was done repeatedly with

the intention of capturing finer details that were missed during the coding process. This was an important opportunity for the researcher to revise the coding system(Terre Blanche et al., 2006).

3.6.5 Interpretation and Checking

During this final process of data analysis, the researcher identified the points in the interpretation that required fixing(Terre Blanche et al., 2006). This step allowed the researcher to personally reflect on his role as both the collector and interpreter of data on the experiences and vulnerabilities of elderly women by discussing it with other people who knew a lot about the topic, as well as those who did not but who were able to consider it from a fresh perspective (Terre Blanche et al., 2006).

3.7 Ethical Considerations

In keeping with the ethical considerations in research, participants are not coerced into taking part in research but take part voluntarily.

3.7.1 Permission for the Study: When humans are used as study participants, care must be exercised in ensuring that the rights of those humans are protected. For this study, ethical approval was requested from the UKZN Ethics Committee. Gate-permission letter to conduct the study with elderly women was also requested and received from the KZN Head of the Department of Social Development.

3.7.2 Informed Consent: Informed consent is defined by Polit and Hungler (2004) as cited by Phakathi (2011) as an ethical principle that requires research to obtain voluntary participation on the subject after informing respondents of possible risks and benefits. Informed consent was obtained from each participant. Informed consent form explaining the purpose and nature of the study was read to each participant. Participants were ensured that the information will only be accessible to the researcher and that the information will only be used for the purpose of the research and that participants were free to withdraw from the research at any time without any negative or undesirable consequences to themselves. All those who agreed to be interviewed gave signed informed consent.

Information was obtained from the social worker who was acquainted with them for purposes of screening their capability to provide informed consent, and to ensure they do not have symptoms of cognitive impairment.

The level of language in the Informed Consent document was reviewed and translated into IsiZulu as it was the respondents' language of origin which made it easier for the participants to understand the study better. Consent Permission was explained and obtained for the audio-recording of the participants.

3.7.3 Confidentiality: Participants were ensured that the information would only be accessible to the researcher and that the information would be only used for the purpose of the study. The limits to confidentiality as indicated in the consent form were explained to the participants that they would be exercised only if it was necessary to protect them from elder vulnerabilities, or if they would be put at a greater risk of any form of abuse.

3.7.4 Anonymity: Anonymity was assured by informing the participants that their names would not be revealed, and that semi-structured interview-schedules would not be linked to names. Participants were identified using pseudo-names. This would prevent them from social stigmatization and or secondary victimization. It was also explained to the participants that data will be kept in a safe and secure place for five years and will be shredded and disposed of thereafter.

3.7.5 Benefits: The researcher explained to the participants that there were no direct or any monetary benefits to them. However, the information they contributed was aimed at the improvement of their protection against any forms of elder abuse.

3.7.6 Feedback after completion of the study: Marlow (1998) argues that as part of the ethical consideration, it is important that participants are informed of the findings of the study after the completion of it. Feedback will be orally given in a meeting with participants using visual aids such as power-point slides. Feedback will be in the form of a summary of the research findings and recommendations. Marlow (1998) asserts that time must be allowed for questions and discussions when giving feedback orally, and the researcher must try not to

become defensive about the research but simply answer questions as clearly and as straight forward as possible.

3.8 Trustworthiness

Lincoln and Guba cited in Babbie and Mouton (2001) assert that trustworthiness of the study consists of three constructs, which are credibility, dependability, and conformability.

3.8.1. Credibility

Lincoln and Guba cited in Babbie and Mouton (2001) argue that credibility is the extent to which the findings in the interviews are said to be accurate, sufficiently rich, grounded in, supported by narrative data and show a logical relationship to each other.

Before the interviews, the researcher explained to the group what the objective of the study was, that a semi-structured interview-schedule would be utilized to collect data and that all participants would be given pseudonyms in alphabetical manner to maintain confidentiality.

Audio recording was used with their informed consent for recording purposes as well as for transcribing their interviews. Interviews were conducted by the researcher personally and the interview schedule completed by him of the responses from the respondents. The semi-structured interview-schedule was in English and questions asked in IsiZulu. The researcher did the translation with the help of a mother-tongue person for respondents to guard against the loss of meaning during communication.

3.8.2. Dependability

According to Ulin et al. (2002), dependability is determined by the consistency of the research process. This became a reality in the researcher's experience of doing this research by face to face interactions with participants. Face-to-face interviews were conducted which were consistent with qualitative methodology.

3.8.3. Conformability

According to Terre Blanche et al (2006), conformability refers to whether or not the findings and conclusions of a study are true to the research objectives instead of the values and biases

of the researcher. Conformability ensures that biases do not influence the study and the information reflected is only of the participant. In this study, conformability was maintained by the signing of consent forms, language translation of semi-structured interview-schedules as well as the keeping of records such as written transcripts and audio-recorded evidence.

3.9 Conclusion

This chapter presented an overview of the study approach, design, and population sample that was used. The data collection instrument and collection process were also presented. This chapter also depicted the ethical consideration including permission of the study, informed consent, confidentiality, anonymity, benefits of feedback to participants. The three constructs of trustworthiness which are credibility, dependability, and conformability were also presented. The next chapter will be chapter 04 on the presenting of findings.

CHAPTER FOUR

FINDINGS OF THE STUDY

4.1 Introduction

This chapter is going to discuss the profile of the participants, and the presentation of main findings in terms of themes conducted from the transcribed interviews. The findings describe the phenomenon embedded in the vulnerabilities experienced by elderly women attending at KwaSwayimani Day Care Centre. All 09 participants were given pseudonyms in alphabetical manner to maintain confidentiality: The words of the participants were written in Italics. Participant A was called Andiswa, B- Bongekile, C- Cebo, D- Dumisile, E- Elethu, F- Fikile, G- Gugu, H- Hlelelwa and I-Isabelle.

4.2 Profile of the Participants

Findings were obtained from 9 Zulu speaking elderly women from KwaSwayimani area. Data sources were the demographic information and interviews. The demographic variables of interest were age, marital status, employment status, educational qualification, total household income per month, type of traumatic experience/ or abuse as stipulated in the Older Persons Act No. 13 of 2006 and the level of experience which is either direct or indirect.

The ages of participants ranged from 61 to 77 years. The mean age is 69. In relation to marital status, 2 were married, 5 widowed, 1 cohabiting and 1 on separation. Regarding employment status, all 9 were unemployed but getting old age and child support grant in respect of their grandchildren. In terms of their educational status, 3 never attended school, 2 passed standard 2, 1 passed standard 4, 2 passed standard 5 and 1 passed standard 6. The majority of them, i.e. 3 out of 9 never attended school. Household income per month ranged from R1, 600 to R3,000 earned from State pension grants. Mean income per month is R2, 120. The majority of 4 out of 9 experienced psychological and financial abuse which was a direct abuse.

Table 2: A table with the biographical data is therefore presented as follows for the information to be seen at a glance:

Name of the participant	Age	Marital status	Employment status	Educational qualification	Household Income per month	Traumatic experience/ type of abuse	Direct/ Indirect Abuse
Andiswa	68	Widowed	Pensioner	Std 2	R1960	Psychological & Financial abuse	Direct
Bongekile	65	Separated	Pensioner	Std 2	R2520	Emotional & Financial abuse	Direct
Cebo	77	Married	Pensioner	Never at school	R1960	Financial abuse	Direct
Dumisile	63	Widowed	Pensioner	Never at school	R2920	Psychological & Financial abuse	Direct
Elethu	70	Widowed	Pensioner	Never at school	R2520	Psychological & Financial abuse	Direct
Fikile	61	Co-habiting	Pensioner	Std 4	R1600	Psychological & Financial abuse	Direct
Gugu	73	Widowed	Pensioner	Std 5	R1600	Psychological abused	Direct
Hlelelwa	77	Married	Pensioner	Std 6	R3000	Financial abuse	Direct
Isabelle	75	Widowed	Pensioner	Std 5	R2600	Financial abuse	Direct
Mean/ Average	69 years	Widowed	Pensioners	Never at school	R2120	Psychological & Financial abuse	Direct

4.3 Presentation of Findings in Themes

Analysis of the data collected from semi-structured interviews revealed four master themes which are presented in the table below alongside the corresponding sub-themes. Themes were supported with quotes to ensure they were appropriately evidenced and grounded in the data.

Table 3: Categorization of Master Themes and Sub-Themes

MASTER THEMES	SUB-THEMES
1.Widowhood	1.1.Living Alone and Social Isolation 1.2. Lack of Spousal Protection
2.Insecurity	2.1. Crime
3. Poverty	3.1. Illiteracy 3.2. Grant-dependent family and Unemployment
4.Gaps identified in service delivery	4.1. Police services 4.2. Monitoring and visiting of the elderly women in their homes. 4.3. Mobile clinic 4.4. Electrification of houses and streets 4.5. Attending at a Day Care Centre

4.3.1 Theme one: Widowhood as a contributory factor to Elder Vulnerability

The first master-theme on widowhood emerged severally from the research objective that sought to find out factors contributing to elder vulnerability. This was experienced in different ways by participants who perceived widowhood as contributing to loneliness, social isolation and lack of spousal protection. As a result of these factors, the elderly indicated that they also become predisposed to financial abuse and health risk factors.

4.3.1.1 Sub-theme 1.1. Living Alone and Social Isolation

The first sub-theme identified was participants' living alone in their homes and social isolation. Most of the participants (5) responded living alone as being contributed by widowhood which they felt exposed them to vulnerability. Most participants agreed in their responses that criminals attack homes where the elderly live alone. For example,

Bongekile stated: “The elderly women who live alone and where there is no male figure in the family are more vulnerable and they always live in fear of the naughty boys in the area who target them solely for being weak and unable to protect themselves.”

Living alone due to widowhood was also perceived as a factor contributing to financial abuse by participants. Isabelle is a widow and only lives with her two grandchildren. She fears that once they go to tertiary institutions, she will be left alone, and her brother will have the opportunity to ill-treat her and take her belongings or assets.

She stated: “I am a widow who stays alone with my two grandchildren. Their mother who is my only daughter passed away. She was not married. My grandchildren are soon going to leave me alone as they will be attending tertiary education. Once they are gone, I will be left alone. As a result, my brother will have the opportunity to kill me for my land we are always fighting over. So, I fear him and the fact that what will happen to me once my two grandchildren have left me.”

It also emerged from several participants that financial abuse in the form of robbery occurs mostly to those elderly women living alone as they are being attacked in their households especially during the days upon which they have collected their old-age pensions.

Andiswa added: “The incidents are rife during pension paydays. If they find you alone in the house, they rob you by taking pension money from you.”

Some perceived living alone and social isolation as a contributing factor to their health problems. For example, Andiswa stated: “I become sick as a result of being alone and in social isolation”.

4.3.1.2 Sub-theme 1.2. Lack of Spousal Protection

In the second sub-theme, (5) five out of (9) nine participants perceived lack of spousal protection as a factor exposing them to financial abuse/ exploitation and emotional abuse including the use of profane language.

Bongekile felt that she was financially abused because her husband is not there anymore to protect her. She stated: “Somebody sold me bricks so that I can renovate my house. We agreed on the amount and that I will pay on terms. What is worrying me is that he is financially abusing me.”

Interviewer: How?

Bongekile: “I paid him all the money owed him but he insists that I have not settled this account. I keep on paying him but don’t know how much is left to finish this account. When I try to raise my concern about this, we argue about it and then he will start using abusive words and swear at me. He keeps on telling me to pay him whenever he sees me.”

Isabelle stated: “As I have explained to you my personal challenge is this one of land conflicts with my younger brother. It would have been better if my husband is still alive. We would go through this together but now he is no more. My younger brother once said that he will shoot me with a gun. At one stage I nearly left but I cannot because I got married here. I have sleepless nights.”

4.3.2 Theme two: Insecurity perceived and defined in terms of fear of crime

The second master-theme identified captured vulnerabilities perceived and defined by elderly women in terms of safety and fear. Insecurity emerged severally from most participants who stated that they fear and experience crime as a result of diminishing elderly male figures in the neighbourhood. Crime included activities such as housebreakings, theft, and sexual abuse.

4.3.2.1 Sub-theme 2.1. Crime

In this sub-theme, all participants defined and shared their perceptions of vulnerability and safety in terms of crime. It emerged frequently from the majority of the participants that they live in fear due to lack of safety.

Fikile stated: “I live in fear in the area where I live now, and I feel not safe. I don’t want to lie to you. I want to search for another place and settle there.”

Andiswa perceived crime as something that makes her live in fear and thus impacting negatively on her health. She stated: *“I am depressed. I also suffer from anxiety and sleepless nights because of fear of criminals attacking me.”*

Bongekile had to say: “When I hear the sound of the car, I think of criminals and feel very much sick. I feel that I can hide myself each time I hear the sound of any passing vehicle and will have persistent problems of falling asleep.”

Andiswa stated: “At one stage they broke into one of my houses in the yard and they stole food and other important belongings. Fortunately, there was no one who slept in that outside building on that particular night; otherwise they would have killed that family member.”

Interviewer: “Are these wicked boys known in the area?”

Andiswa: “No, we have tried to trace them but no one knew of them in the neighborhood.”

Interviewer: Was this for the first time they came into your house?

Andiswa: “No, this was for the second time they came into our house.”

Hlelwa also responded that she was also a victim of housebreaking. This occurred when she was not around. She attested as follows:

“They broke into my house and stole food, clothes and money that I left for myself.”

Several participants perceived lack of male figures in the area making them vulnerable to criminal activities. For example, Elethu reported that there are no longer elderly male figures in the area to protect them against any form of criminal activity. For her, the adult children/youth are victimizing them because the male figures have diminished, and this is the reason why they are being abused.

Interviewer: Why are you not safe and live in fear?

Elethu stated: “Because ‘amadoda awasekho’ meaning the male figures in this area have diminished. We are not protected and cultural values are no longer being upheld in terms of respecting the elderly. This is the reason why the naughty boys are taking advantage of us as we are weak and vulnerable”.

Admission in residential facilities was perceived by **Andiswa** as an alternative way to cope with criminal activities due to the lack of male figures in the neighbourhood. However, there was a concern as to who will take care of her grandchildren and or belongings once admitted to a residential facility. **Andiswa** stated: *“I am scared that criminals will attack and rape me especially now that I do not have a husband to protect me. Sometimes I feel like being admitted to an old age home but I cannot because if I am admitted at an old age home what will then happen to my grandchildren and my assets.”*

4.3.3 Theme three: Poverty

Poverty was the third master-theme identified. Several participants indicated that poverty has contributed to their illiteracy.

4.3.3.1 Sub-theme 3.1. Illiteracy

Illiteracy was a sub-theme found to be a factor contributing to elder vulnerability. This emerged from several participants. For example, **Gugu** went as far as Standard 5 today known as Grade 8 at school and she stated: *“If you were highly educated you would be called ‘unondindwa’ meaning a derogatory label often associated with a loose woman who sleeps around So, girls were not encouraged to be highly educated.”*

However, the two Andiswa and Bongekile indicated that they went as far as standard 2 at school, Fikile did standard 1, Gugu and Isabelle completed standard 5 and Hlelelwa did standard 06.

Cebo and Dumisile never attended school.

Cebo stated: “I never went to school. I was looking after my father’s cattle (Ukwelusa)” meaning being a cowherd.”

Dumisile responded: “I was the only child at home who grew up in a rural area. My parents owned a couple of cows and I never attended school as I had to be a cowherd.”

Elethu also agreed that she never went to school as she was a cowherd. She mentioned that this was because female children were not encouraged by then to be highly educated because it was assumed, they would be cleverer and lead a loose life full of lack of respect and Ubuntu.

Dumisile complained that she was married before. Her husband had four wives. The other two wives are deceased. The two wives left are herself and her husband’s second wife “umnakwabo”. She comes after her. She is a schoolteacher by profession. Her husband was responsible for her tertiary education as she is now a professional teacher.

Dumisile was observed feeling {worried}, and she stated: “My husband left all his insurance policies with the other wife “umnakwethu” as she is the only one educated. My husband was a truck driver in Durban. When he passed away, all his death benefits were taken by “umnakwethu”. She used to get death benefits monthly, but she would only give me little money i.e. (R1000), and would take a bigger share. “Just recently she has told me that all death benefits that she was receiving monthly on our behalf have been finished and so there is no more money due to them, and yet she is still collecting death benefits.”

Dumisile felt this contributed to her elder vulnerability because of being illiterate.

She stated: “This challenge has affected me a great deal. Now I am suffering from stress, anxiety and my blood pressure is high because I don’t know how I am going to maintain my children and grandchildren as I need money. I have lost appetite. Even here at the Day Care Centre I am not having my meals due to stress and anxiety. What I suspect is that my husband’s second wife changed banks in a bid for me not to access this money.”

It would appear from Dumisile's story that being illiterate is a contributing factor to her financial abuse.

4.3.3.2 Sub-theme 3.2. Grant-dependent family and Unemployment

This sub-theme highlights the plight of the majority of participants, i.e. (5) out of (9) participants who stated that their pension grants are stretched to support their grandchildren some of whom are orphaned. They stated that the biological fathers of these children have refused paternity and they are not willing to maintain their children. Some fathers are reported not taking care of their children because their whereabouts are unknown.

In engaging the participants' responses on the same question and how they are affected, this is what six (6) out of (9) participants had to say:

Fikile: "The challenge I experience as an elderly person is that I feel that I am being financially abused."

Interviewer: Why?

Fikile: "Because I carry the burden of taking care of the whole family members with my meagre pension grant."

Isabelle: "I stay alone with my 05 grandchildren. Their mother who is my only daughter passed away. She was not married. The biological father of my grandchildren lives somewhere in Kwa-Zulu but is not looking after them. I can't enjoy my pension money as I also use it to support the rest of my family members."

Cebo: "Three grandchildren are dependent on me financially. Their biological mother who is my daughter is deceased. I am alone and there is no one to assist me."

Dumisile: "What is positive about my life is that I am living happily with my 04 daughters. What is disturbing me though with them is that they all have children but are not married. The children's fathers are not supporting my grandchildren. I am supporting them all with my old age pension."

Elethu:“We are a family of ten. It’s myself, my 05 grandchildren and my 04 biological children, i.e. 2 sons and 2 daughters.”

Interviewer: What is the total household income per month?

Elethu:“Old Age Grant (R1600) and foster care grant for my niece, i.e. R920. Total is R2, 520.”

Interviewer: Are all family members depending on you financially?

Elethu:“Yes, we are all dependent on my old age pension and foster care grant. The biological fathers of my grandchildren are not supporting them. The whereabouts of some of them are unknown. My pension money is also too small.”

Fikile:“The challenge I experience as an elderly is that I feel that I am being financially abused because I carry the burden of taking care of the whole family members with my pension money”

Unemployment of the adult children of elderly women also emerged frequently from several participants and this was perceived as being a contributing factor to elder vulnerability because it has resulted in them maintaining their families and their grandchildren with their meagre pension grants. In some families, it was reported that members are dependent on old age grant.

Fikile stated: “The challenge is that my 04 grown up children are not working. They depend on me financially. They can’t find jobs due to unemployment. Their father (my partner) is also not working. My grandchild is not receiving child support grant either because her mother is not having an Identity document to register her for the grant. By the time month end approaches, I am penniless.”

Elethu responded: “No one is working in the family due to unemployment. What is negative about my life is that I am taking care of my own 04 children and my 05 grandchildren with my pension. The biological fathers of my grandchildren are not supporting them as their whereabouts are unknown. My pension money is too littl

It is a fact from the responses of the participants that the elderly utilize their pension grants in order to maintain their adult children and grand-children but neglect to take care of their health problems.

For example, **Isabelle** stated that she is sickly, but she is unable to purchase medication for herself with her pension money as she must look after her children and grandchildren. She maintained that she is suffering from chronic daily headache and swollen feet. **Isabelle** further stated: *“I don’t have sufficient money to purchase medication nor see a medical doctor. I use my pension money to look after my children and grandchildren, but my health is being neglected.”*

4.3.4 Theme four: Gaps identified in service delivery to make the situation better

From the interviews with participants, it emerged frequently that they need services such as an effective and efficient policing system, a mobile clinic, electricity supply and the monitoring of elderly women living alone in their homes.

4.3.4.1 Sub-theme 4.1. Police Services

In this sub-theme, all nine participants stated that they needed the police services the most to deal with the challenges of elder vulnerability. They were concerned that the cases they report at the police station are not attended to immediately. They indicated that they have dealt with challenges brought about by vulnerabilities by engaging the police and traditional local structures but there were delays in responding to reported cases and at some point, they did not get helped. It emerged frequently from their responses that they need the police and local traditional structures to be more visible and to attend to their reported cases immediately. Some preferred the services of local traditional leaders like “Izinduna” to those of the police because they were quick in responding to their concerns.

Fikile stated: “We need the protection of the police, and they must act quickly if called. If you report any incident of abuse to the police or ask for their protection, they delay in responding. It can take a few days before the police come. They only follow up on minor cases. We cannot trust the police anymore.”

Bongekile stated: “I think the police should be more visible.”

Interviewer: Why?

Hlelelwa responded: “The police delay in attending reported incidents. If you report any incident of abuse to the police or ask for their intervention, it can take a few days before the police come. We, therefore, need proper, committed and dedicated policemen and local traditional leaders.”

Fikile suggested that she prefers the services of the local traditional structures because they are effective and efficient in their service delivery as they attend to cases immediately. **Fikile** stated: *“I don’t trust the police anymore. I prefer to report any incidents of abuse to the Induna than to the police. The reason is that the Induna is able to summon the culprit immediately and impose necessary disciplinary actions together with the elders/traditional leaders of the community.”*

Bongekile said that some policemen and traditional leaders accept bribes. She stated: “We need real policemen and real Indunas. Our Induna and the police are also being bribed and hence I don’t trust them anymore.”

Similar responses of the rest of other participants after this was communicated by Bongekile were observed by the researcher.

4.3.4.2 Sub-theme 4.2. Monitoring and Visitation of the Elderly Women Living Alone in their Homes

The sub-theme on monitoring and visitation of the elderly women living alone was perceived frequently as a need by several participants when defining and sharing their perceptions on vulnerability in terms of safety and fear. These incidents were reported to be occurring mostly during the day when the elderly are left alone especially those who could not access a Day Care Centre due to ill-health. The incidents were reported to be rife during pension paydays. Some accounts of these were given by participants as follows:

Isabelle felt that the elderly need social workers and community caregivers to frequently monitor and visit elderly women living alone and sick in their homes to ensure their safety and protection. She herself is sickly and cited an incident where she is being a widow leaves in fear and suffers from anxiety as a result of the conflict over her land with her brother who ill-treats her for resisting her land. At one stage she nearly left her house, but she could not do so because of her matrimonial obligations. As a result of this, she has sleepless nights. She indicated that she is scared to report this matter to the police or the Induna (traditional leader) because her Induna is her same brother who is abusing her.

Hlelelwa argued by saying as follows “Sick elderly women should not be left alone in their homes because if left alone they are more vulnerable to abuse and hence they need to be visited and monitored by health care workers and social workers frequently”.

Bongekile stated: “Before this Day Care Centre was established, what was happening in the area is that the elderly women were targeted during the day especially those living alone. They were demanded Id copies and pension cards and even raped. These incidents were only occurring during day-light when the elderly are left alone”.

Interviewer: Why these incidents are happening during the day-light only?

Bongekile stated: “Because at night the elderly women are surrounded by other family members. My grandchildren are now big enough. We can now fight anyone who attacks us at night when everybody is at home.”

Fikile felt the same way by indicating that she leaves in fear and not safe in the area where she resides and as a result, she wants to look for another place elsewhere. But being visited and monitored frequently by government officials would make the situation better for her.

Elethu raised a concern that they are not protected because cultural values are no longer being upheld in terms of respecting the elderly. This is the reason why the naughty boys are taking advantage of them as they are weak due to ill-health and ageing. As a result of this, the elderly need to be monitored by government officials so that they are not victimized.

4.3.4.3 Sub-theme 4.3. Mobile Clinic

In this sub-theme, the elderly kept on mentioning a mobile clinic as a need to visit them at the Day Care Centre. Many of them stated that the clinic will be of help to them as some become sick due to incidents of being attacked by criminals in their homes and of the stress of taking care of their grandchildren and unemployed family members with their small pension monies. Others have become sick as a result of living alone and being socially isolated.

For example, **Hlelelwa** stated: “There is a need for a mobile clinic to visit a Day Care Centre so that elderly women can receive health care services. I always fear crime and being attacked. As a result, I get sick at night and suffer from insomnia, depression, and hypertension and the others also feel the same.”

4.3.4.4 Sub-theme 4.4. Electrification of houses and the streets

A sub-theme on lack of electrification of houses and streets emerged as a reason for elder vulnerability from several participants.

Hlelelwa stated that when it is dark, they live in fear and become vulnerable. The comments from other elderly ladies when Hlelelwa expressed these fears were that their homes in rural areas are far away from the streets and it is dark at night due to lack of street lights and hence they become vulnerable to criminal attacks.

Isabelle mentioned: “I feel that we as the elderly living in secluded rural areas need electricity because when it is dark at night we are scared and become more vulnerable to abuse of criminals attacking us and robbing us.”

From the group there was none living near the road with streetlights except **Gugu** who stated as follows:

“My house is just on the road with electricity supply and so I don’t get victimized due to lack of electricity like the other elderly women whose houses are in a quiet secluded area far from the main roads and without electricity supply in their areas.”

Fikile had to say: “Those who live near the main streets are better safe than those living far from the streets.”

4.3.4.5 Sub-theme 4.5. Attending at a Day Care Centre

In this sub-theme, several participants perceived attending at the Day Care Centre as a way of dealing and coping with elder vulnerability. This was important to participants and a reason for attending at the Day Care Centre for their protection and safety.

Andiswa and Bongekile stated:

“What we needed most was a Day Care Centre which we are grateful to have because we partake in various active ageing activities and we are away from the stress of being alone at home during the day and we feel secured here”.

Interviewer: “What do you mean by the stress of being alone at home?”

Andiswa responded: “Being alone at home makes one vulnerable to abuse because criminals attack elders who are left alone at home especially during the day.”

Fikile stated: “At the Day Care Centre, that is where we get nutritious meals. We also sing together, pray together, listen to stories and do handcraft and receive protection.”.

Dumisile stated: “At the center, that is where social workers listen to our problems and help us. So, it is good being there as we feel safe and protected.”

4.4 Conclusion

This chapter presented the main findings of the study in four themes which are widowhood, insecurity, poverty, and services required by the elderly who are vulnerable to abuse to make their situation better. Themes were presented alongside their corresponding sub-themes such as living alone and social isolation, lack of spousal protection, crime, illiteracy, grant-dependent family and unemployment, police services required, monitoring and visiting of the elderly women in their homes, services of a mobile clinic, the electrification of houses and streets, and the attendance of the elderly at a day-care centre. Themes were supported by the

words of the participants which were written in Italics. All participants were given pseudonyms to maintain confidentiality. The next chapter will be chapter 05 on the discussions of the findings, recommendations and the conclusion of the study findings.

CHAPTER FIVE

DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter presents a discussion of the most significant findings of this research study, the conclusions as well as the recommendations. The aim of the study is to explore and understand vulnerabilities faced by the elderly women in KwaSwayimane Area under Umshwathi Local Municipality.

The findings will be discussed in relation to themes emerged from the research questions, the theoretical framework used in this study as well as the literature reviewed and previous studies on elder vulnerability. The study initially had the following questions:

What are the life-stories of the elderly women attending at KwaSwayimane Day care Centre?

How elderly women have dealt with the challenges brought about by vulnerabilities?

What are contributing factors to the vulnerabilities of elderly women?

What services are needed and required by elderly women?

5.2 Summary of major findings

The summary of findings is outlined below:

- It emerged severally from this study finding that widowhood was a contributing factor to loneliness, social isolation and lack of spousal protection. Loneliness, social isolation and lack of spousal protection exposed the elderly to financial abuse and health risk factors such as depression, anxiety, insomnia.
- This study also revealed that the elderly became vulnerable because of being insecure in their homes due to crime. This was felt because of the diminishing elderly male figures in the neighbourhood. Crime included activities such as housebreakings, theft, robbing them of their pension grants and sexual abuse. Criminals attacked houses where the elderly lived alone.

- The finding of this study revealed that poverty was a contributing factor to the abuse of the elderly. Poverty was caused by being illiterate. Being unable to read and write made some participants vulnerable especially to financial abuse. Some felt that they were poor because they had to take care of their grandchildren with their meagre pension grants which also made them vulnerable to financial abuse. Unemployment of the adult children was exacerbated by poverty which caused the elderly to maintain their families with their pension grants.

Lastly, to make the situation better, the finding of this study revealed the following service gaps to the elderly:

- The elderly need the police and local traditional authorities (izinduna) to be more visible and quicker in attending to their reported incidents of abuse.
- There is a need for a mobile clinic to come to the Centre and attend to those attendees suffering from health problems contributed by elder vulnerabilities such as depression, insomnia, anxiety, feeling lonely and social isolation.
- Electricity supply for houses and streets in other villages was a great service needed. The elderly stated that when it is dark, they live in fear and become vulnerable to criminal attacks.
- Elderly women who are homebound due to ill-health and living alone require the services of social workers and community health caregivers through visiting and monitoring them frequently in their homes and render health care and psychosocial support services.

5.3 Discussion of Findings

5.3.1 Theme one: Widowhood- The Micro System

According to the ecological systems theory of Urie Bronfenbrenner as quoted by Roberto and Teaster (2017), the micro-system is the innermost system of a person's immediate surroundings and relationships. Authors maintain that in the micro-system for example, the

elderly are influenced by people that have direct contact with like family members, caregivers or spouses. If spouses die, then loneliness occur due to widowhood.

In this theme, living alone and social isolation is perceived by the elderly as contributing to elder vulnerability. It would appear from most of the participants' responses that elderly women living alone due to widowhood are more vulnerable to abuse of any form. They are attacked by strangers/criminals at any time in their homes. They mentioned that living alone attracts criminals to their households and as such, they become vulnerable to crime. The implication is that elderly women living alone can be far away from their families, community members and support systems that are not within their reach in-order for them not to be open to danger, threat and lack of protection. The finding coincides with the results of the study conducted by Schiamberg and Gans (2000) that living alone of the vulnerable elder person is one of the reasons for elder abuse.

Living alone due to widowhood was also perceived as contributing to financial abuse by one participant whose family member wants to seize her land. According to the Older Persons Act, 2013, this finding was seen as an illegal use of an older person's property/ asset without her consent. This finding also coincides with the results of the study conducted by World Health Organization (WHO, 2011) which revealed that when the husband of an older woman dies, she may not inherit the property. It is seized by family members and she is exposed to abandonment, poverty and abuse. The finding from several participants also revealed that financial abuse in the form of robbery occurred mostly to those elderly women living alone as they are being attacked in their households especially during the days upon which they have collected their old-age pensions.

The study revealed that most elderly persons experienced living alone and social isolation as a contributing factor to their health risk. This is in line with Byers, Yaffe et al. (2010) who argued that lonely and socially isolated individuals become increasingly depressed because of their isolation. This can be argued especially from social work perspective where the elderly who live alone are perceived as vulnerable in need of constant support and protection.

Lack of spousal protection due to widowhood was found to be exposing the elderly women to crime. This is in line with the findings of the study conducted by Gauteng Department of Social Development (2007) which revealed that greater than 80% of older persons do not have a life-long companion anymore due to being widowed or some other cause and as a result they find themselves in a possible emotional void, needing increasingly more protection and support from their remaining family members which are sometimes not available.

5.3.2 Theme two: Insecurity perceived and defined in terms of fear of crime- The Exo-system

According to the ecological systems theory of Urie Bronfenbrenner as quoted by Roberto and Teaster (2017), this theme is represented in the third layer of the model which is external to the individual but affects her through interactions with structures in the micro-system. In the exo-system, the elderly for example, is influenced by actions of criminals that do not have an active role in her life.

The findings indicated that elderly women feared and perceived crime as a result of diminishing elderly male figures in the neighbourhood. Houses where the elderly lived alone were frequently attacked by criminals. Crime included activities such as housebreakings, theft, robbery of their pension monies. They experienced crime as something that made them live in fear and thus impacting negatively on their health. This finding resonates the study conducted by the Department of Economic and Social Affairs of the United Nations, New York (2013) wherein Hightower, et al (2006) have found that abuse of the elderly has a negative health impact such as depression, anxiety, insomnia, confusion, irritable bowel syndrome and ulcers.

The study revealed that elderly women are still being sexually abused in the area. This is in line with the view expressed by Kosberg (1988) as quoted by Schiamberg and Gans (2000) that older women than men are more vulnerable to sexual abuse. Furthermore, the study conducted by (NCOP,2006) revealed that sexual abuse and rape of the elderly women are as a result of the spoken 'older persons cleansing myth' in which it is believed that by having sex with an older person you will be cured of HIV/AIDS.

The study findings indicated that no one from the participants was willing to disclose or report being a victim of sexual abuse. It could be assumed that those who have been violated sexually were afraid of disclosing such sensitive information to the interviewer probably being a male figure. However, the researcher attempted to do a lot of probing in order to obtain as much information as possible, but it was somehow challenging.

Findings also revealed that admission into residential facilities was perceived by some as an alternative way to cope with criminal activities taking place due to lack of male figures in the neighbourhood though there was a concern as to who will take care of their grandchildren and or other belongings once admitted into residential facilities.

5.3.3 Theme three: Illiteracy, poverty, grant dependency and unemployment- The Macro-System

In this theme, it suffices to state that illiteracy, poverty, grant dependency and unemployment are issues found at the outermost layer of the ecological systems theory of Urie Bronfenbrenner which are comprised of the cultural values, customs, and laws that have a cascading influence throughout interactions with all of the other systems (Roberto and Teaster, 2017). Therefore, it is the researcher's view point that the elderly women experience systematic abuse where their needs such as poverty, education, and unemployment are not attended to by government.

The study finding revealed that the elderly were vulnerable because of being illiterate. This emerged from several participants. This was regardless of whether they may have chosen for it. They maintained that the reason for being illiterate was due to cultural values upheld in their communities and issues of gender inequality such as encouraging girls not to further their studies than boys. They were made to be cowherds than going to school. The finding is supported by what is found in Gender Equality in Education (2018) in which it was argued that millions of girls and young women across the world still face huge barriers to education and hence they become illiterate.

With grant dependent families, the finding revealed that the majority of the elderly stretched their pension grants to support their grandchildren some of whom are orphaned. They stated

that the biological fathers of these children have refused paternity and are not willing to maintain their children. Some fathers are reported not taking care of their children because their whereabouts are unknown. Participants also felt that their pension grants are too meagre to take care of themselves. They reported being financially abused because of the situation being brought about by poverty.

The finding coincides with the findings of the study conducted by Keikelame and Ferreira in 2000 where the majority of participants perceived abuse as relating to having to care for their grandchildren. The finding is also supported by Older Persons Act No. 13 of 2006 which acknowledges that financial/economic abuse or exploitation is the illegal use of an older person's grant or money without an understanding of the purposes for which the money is being intended for.

It emerged from the study finding that due to unemployment some family members are dependent on old age pension, foster care or child support grants paid out. One participant stated that she is sickly, but she is unable to purchase medication for herself with her pension money as she must look after her children and grandchildren.

Due to unemployment, the study finding revealed that the elderly utilize their pension grants in order to maintain their adult/ own children as well as their grandchildren but neglect to take care of their health problems.

Unemployment appears to be a major contributing factor to elder vulnerability as most of the participants had to take care of their unemployed family members with their pension monies rather than paying attention to their personal needs. It is ironic according to Keikelame and Ferreira (2000) that an older individual's pension may be a major source of income for a poor household. Pension sharing is the norm for a poor household. Yet an older person is abused because of her pension benefits.

5.3.4 Theme four: Gaps identified in service delivery to elderly women-Macro level

The research question sought to establish services required by the elderly women and what they perceive as their needs in the area.

In this theme, the researcher's assertion is that the elderly women experience vulnerabilities at Macro-level due to lack of service delivery from the police, traditional authorities, social workers and community health workers, mobile clinic, electrification of houses and attendance at a Day Care Centre. These are issues at the outermost layer of the ecological systems theory according to Urie Bronfenbrenner which are comprised of the cultural values, customs, and laws that have a cascading influence throughout interactions with all of the other systems (Roberto and Teaster, 2017). Therefore, it is the researcher's view point that the elderly women experience systematic vulnerabilities that predispose the elderly to abuse as a result of lack of service delivery from government and inadequate policies and societal values that discriminate the elderly.

5.3.4.1 Police Services and the services of the Traditional Authorities

The study finding revealed that the elderly required the services of the police and traditional leaders to be visible. The elderly were concerned that cases they report at the police station are not attended to immediately. They indicated that they have dealt with challenges of elder vulnerability by engaging the police and traditional local structures but there were delays in responding to cases reported and sometimes they could not get assisted. This contributed to systematic abuse because they could not get services they needed timeously.

5.3.4.2 Monitoring and Visitation of the Elderly Women Living Alone in their Homes

It emerged from the study findings that monitoring and visitation of the elderly women living alone were perceived frequently as a need by several participants when defining and sharing their perceptions on vulnerability in terms of safety and fear. These incidents were reported to be occurring mostly during the day when the elderly are left alone especially those who could not access a Day Care Centre to meet with the others attending at the Centre due to ill-health. The incidents were reported to be rife during pension paydays. Elderly women who are homebound due to ill-health and living alone required the services of social workers and

community health caregivers by visiting and monitoring them frequently in their homes to render health care and psychosocial support services.

5.3.4.3 Mobile Clinic

In the sub-theme, the elderly kept on mentioning a mobile clinic as a need to visit them in the Day Care Centre. Most of them stated that the clinic will be of help to them as poor health exposes them to more vulnerability and some have experienced ill-health due to elder abuse. Fear of crime exposed them to need health care interventions as some mentioned that they could not sleep at night and ended up having depression and high blood pressures.

5.3.4.4 Electrification of houses and streets

It emerged in this study that lack of electrification of houses and streets emerged as a reason for elder vulnerability from several participants. Participants stated that when it is dark, they live in fear and become vulnerable. They feared that their houses in rural areas are far away from the streets and it is dark at night due to lack of streetlights, and hence they become subject to criminal attacks. It is the researcher's opinion that in rural areas life constraints are such that there are no streetlights and it becomes dark at night. Unlike in urban areas, lack of security doors, security entrance gates, security fencing as a result of lack of electrification exposes the elderly to criminal activities.

5.3.4.5 Attendance at a Day Care Centre

The study revealed that several participants perceived attending at the Day Care Centre as a great necessity to deal and cope with elder vulnerability. This was important to participants and a reason for attending at the Day Care Centre. It was apparent from the participants that the facility keeps them protected and busy during the day. They mentioned that they are not exposed to vulnerabilities caused by being left alone and home-bound during the day. Garcia-Martin et al (2004) in line with this finding similarly found that activities in Day Care Centers can help older adults to adopt more positive, active roles, which can lead to increased levels of life satisfaction and protection.

5.4. Conclusions of the study

The research aimed to explore and understand vulnerabilities faced by elderly women in KwaSwayimane Area under Umshwathi Local Municipality. Based on qualitative data analysis, it can be concluded that:

- Elder vulnerability is prevalent amongst elderly women especially those widowed, living alone, in isolation, and illiterate without anyone noticing it.
- The elderly are exposed to one or more vulnerabilities, the most common one being vulnerability to criminal attacks.
- Financial exploitation happening in the home environment where elderly women must take care of their family members with their meagre pension income also makes them vulnerable to financial abuse.
- Helping professionals from all government and non-governmental organizations need to be observant of elder vulnerability or report perpetrators as per the Older Person's Act (2006) and ensure proper service delivery towards the elderly in a co-ordinated and integrated manner.

5.5. Recommendations

Based on these conclusions, recommendations are made as follows:

5.5.1 Social Work Recommendations

5.5.1.1 Social Work Curriculum

It is recommended that the social work curriculum include a detailed gerontology syllabus since there is a fast-growing number the elderly in our society and they need special social work care as a vulnerable group. This should be incorporated in the undergraduate syllabus as a subject on its own. Gerontology should be recognized as a specialty because our society needs specialists to deal with elderly people's special needs.

5.5.1.2 Further Social Work Research

A further in-depth explorative and qualitative study that will explore the views of the elderly on abuse as it occurs in the community is recommended. This will add to the limited existing literature on the subject.

5.5.1.3 Social Work and Policy

In South Africa, although there is the Older Person's Act (No13 of 2006), it is not fully implemented to the benefit of the elderly. It should be known to all social workers who should transfer their learning to all citizens and other helping professionals, the police, traditional leaders, and health care professionals who deal with the elderly every day. Social work policymakers dealing with abuse of the elderly women should also consider how they could target perpetrators of abuse in their attempts to improve the condition and circumstances of abused elderly women.

5.5.1.4 Social Work Home-Visitations

Social workers and community caregivers attached to the Department of Social Development to conduct regular home visits to monitor the elderly that are home-bound due to ill-health and unable to access Community-Based Care Centers implemented in terms of the Older Person's Act (No13 of 2006).

5.5.1.5 Social Work with Support Groups

It is further recommended that individuals, caregivers, and families affected by elder abuse be involved in support groups implemented by professional social workers. Lewis (1988) argues that support groups form part of a range of psycho-social interventions. Ostrow (1990) as quoted by Mhlongo (2004) states that support groups assist group members to enhance self-esteem while benefitting other group members at the same time. Lewis (1988) lends support to Ostrow (1990) by arguing that support groups give members an opportunity to discuss issues and problems related to other conditions with others who are experiencing similar problems.

5.5.2. Further Recommendations

System	Explanation
Micro-system	The immediate contexts in which the individual participates and the people in these contexts are in direct contact with the individual, e.g. family members or care-givers.
Meso-system	Influences between members of the micro-systems, e.g. daycare centre and family relationships
Exo-system	External influences on the individual from systems not directly related to or external to the micro-system, e.g. policy and legislation.
Macro-system	Broader cultural and social influences, e.g. social and economic status

5.5.2.1 Multi-Disciplinary Approach

This study recommends a multidisciplinary approach in line with the KZN Premier's Operation Sukuma Sakhe Programme to the management of elder abuse. In caring for and recognizing the problems facing the elderly in the community, a multidisciplinary approach is needed incorporating Social Workers, Community Care Givers, Police, Local Municipality, Traditional Leaders, etc. An applicable referral system needs to be fully functional to attend to the elders. The following outlined below affirm the multi-disciplinary approach system:

- Faith-based organizations (FBO's) should have a platform to address ageism and to restore family values and family bonds and to speak out against evils of elder vulnerability in the socio-political, economic and cultural spheres. (Africa Conference on Ageing, 2004).
- The Department of Education to make adult basic education and training (ABET) available to the elderly who are illiterate. The majority of older persons did not have the opportunity to be educated, which increases their vulnerability as they have to rely on others for information. Educational programmes to be put in place to ensure that basic education as a right is made available to all those who need it. (Africa Conference on Ageing, 2004). Adult Basic Education and Training (ABET) to be

aimed at senior citizens to improve literacy and provide skills essential for a better quality of life. (KwaZulu-Natal Premier, Dr. Zweli Mkhize, 2010).

- The media should endeavor to portray ageism in a positive manner. This can break stereotypes down. (Africa Conference on Ageing, 2004).
- Health Department to ensure that health care services including mobile clinics for the elderly in rural areas and those attending at the Community Based Care /Day Care Centers are available and accessible due to challenges of access to these services especially in rural areas where there is lack of appropriate transport and information on the availability of such services. (Africa Conference on Ageing, 2004). Also, The Department of Health to provide free health care services to older persons as they are part of the vulnerable groups.
- The police and other relevant structures including traditional authorities and Ward Councilors to work in a coordinated and integrated manner in giving priority to crimes pertaining to elder abuse and cases reported thereof.
- Older persons through the voice of KZN Provincial Senior Citizens Forum to be given the opportunity to participate in the critical issues such as the development of policies and legislation about the services that they need or receive since their voice, even though it is a voice of experience and wisdom is rarely taken into account. (Africa Conference on Ageing, 2004).
- Local Municipality to look at villages/wards without electricity supply as criminal activities towards the elderly are reported to be rife as a consequence of lack of the electrification of households and streets in the rural areas where households are secluded and away from the main roads.

5.6. Implications for Social Work Practice

In practice, professional social workers play various roles to help clients. According to Moriarty et al. (2015), these roles include the role of counselling, broker, advocacy, educator, and organizer. They are discussed below:

5.6.1. Counselling Role: Professional social workers need to play counselling role with the victims of elder abuse. Elderly women affected by elder abuse need psychosocial counselling services by professional social workers and that of the significant others. Ostrow (1990) as quoted by Mhlongo (2004) argue that this involves high quality, culturally and gender-sensitive counselling. To support this viewpoint, Mlomo- Dlomo (2000) as quoted by Mhlongo (2000) also argue that counseling seems to be the most effective form of psychosocial intervention because it focuses on a person's social environment, her relationships, attitudes and beliefs, and in this case, about elder abuse, aspirations, and hopes.

5.6.2. Broker role: Social work professionals and community caregivers to play the role of the broker by being involved in the process of making referrals to link the affected elderly person to needed resources and follow up to ensure the needed resources are attained.

5.6.3. Advocacy role: Professional social workers to play an advocacy role in ensuring the issuing of the 'Protocol on Management of Elder Abuse' to serve as guidelines for government officials, non-governmental organizations (NGOs) and communities in their quest to protect and empower the older persons against abuse and neglect. The Protocol makes it clear that prevention is everybody's responsibility and an interdisciplinary approach is necessary (Department of Social Development, 2010)

5.6.4. Educator role: Social work professionals from the Government and the NGO Sector to continue with the role of the educator by conducting awareness campaigns such as holding roadshows especially at pension pay-points, hospitals, clinics, and community centers, and make use of the media (newspapers and radios).

5.6.5. Organizer role: Professional social workers to play the role of the organizer wherein they are involved in many levels of community organization and action. According to Moorthy, (1966), social action is a method of mobilizing masses to bring about structural changes in the social system. Therefore, professional social workers must utilize this method of social work in order to bring about structural changes in the social system intended to deal with the scourge of elder abuse.

5.6.6. Facilitator role: The role of the facilitator to be played by social workers in facilitating groups in the rendition of prevention and treatment programmes on elder abuse and the at rights of the elderly at Community Based Care Centers as well as Day Care Centers in terms of the Older Persons Act (No. 13 of 2006)

5. 7. Limitations of the study

5.7.1. Methodological limitations and mitigating factors

The sample consisted of (20) elderly women attending at KwaSwayimane Day Care Centre. The reason for selecting a sample of 20 was because the participants attending at the centre were more than 30 and the researcher used a sample consisting of more than half the participants.

According to Clarke and Braun (2013), a sample of 20 is justified by the fact that a sample size of more than 12 to reach data saturation is recommended in qualitative studies. However, probing continued until the researcher felt that he had reached saturation, a full understanding of the participants' perspective (Legard. et al 2003).

During the day of the interview, only 9 participants were interviewed as 11 of them could not avail themselves for interviews as they were collecting their pension grants at SASSA office, some had to attend a funeral in the neighbourhood to conform to cultural issues for mourning purposes, and others had unpredictable health conditions. Due to time limits, the researcher could not come back as he did not want to repeat interviews to contaminate the research questions. The study was also limited by a shortage of transport experienced by the elderly women in the rural area to access the centre in-order to participate in the research interviews.

Age of the participants and cultural bias such as loyalty towards the researcher also contributed to limitations of the study.

According to Groenewald (2004) as quoted by Giles (2014) data analysis could have been strengthened further with a 'validity check' by returning to participants to determine if the essence of the interview was correctly captured. However, due to time constraints, this was not possible.

The study was conducted in KwaSwayimane area which is predominantly dominated by Black Africans. The study was limited because it focused only on one ethnic group (Zulu speaking-people) of which there is other groups that are also important.

According to Mariah (2003), the size and type of sampling methods used impact on the generalizability of the study. In this study, the size of the sample was small due to the nature and sensitivity of the research topic investigated. However, Patton cited by Mariah (2003) argue that qualitative data is more concerned about the richness of the data obtained rather than the number of participants. As much as there was a small sample size of the participants, one may argue that the study cannot be generalized to the bigger population.

Data was collected in isiZulu and transferred into English. The information in this process may have lost its meaning as it was originally given by participants. The issue of power imbalance between the interviewer and interviewee was a limiting factor especially with the interviewer being a male figure interviewing vulnerable elderly women. Oakley (1981), in the feminist theory, argues that the aspect of unequal power relations in research can be addressed through participatory model for research where the relationship between the researcher and the researched is non-hierarchical, non-authoritarian, non-exploitative and non-manipulative.

5.8. Conclusion

This chapter presented a discussion of the findings of the research study, the conclusions, the recommendations of the study and the implications for social work practice. The methodological limitations of the study, their mitigating factors and the chapter conclusion were also presented.

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APPENDICES

Appendix A: Gatekeeper Permission (Draft Letter)



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SUBMISSION

TO : THE HEAD OF DEPARTMENT

MS N.G KHANYILE

FROM : MRS CD ZONDI

ACTING DIRECTOR

UMGUNGUNDLOVU DISTRICT

DATE : 05 DECEMBER 2017

REQUEST TO CONDUCT RESEARCH AT KWASWAYIMANI DAY CARE CENTRE
OF THE DEPARTMENT OF SOCIAL DEVELOPMENT: MR. R.J. MOSOEU:
MASTER'S DEGREE IN SOCIAL WORK

PURPOSE

The purpose of the submission is to request the Head of Department to grant approval to Mr. R.J. Mosoeu to access research participants, i.e. the elderly women attending at KwaSwayimani Day Care Center for research purposes.

BACKGROUND

Research proposal has been submitted to the Ethics committee of the University of Kwa Zulu-Natal. One of the requirements of the ethics committee is a letter of permission from the Head of the Department giving Mr. Mosoeu permission to conduct research at KwaSwayimani Day Care Centre to a sample of elderly women.

The Department of Social Development encourages employees to upgrade their studies in order to keep up with the development of the organization and improvement of service delivery. It is against this background that Mr. R.J. Mosoeu requests permission from the Head of Department to undertake this study with a purposeful sample of 12 elderly women attending at KwaSwayimani Day Care Centre. The topic of his research is 'Sihlukumezekile': The Elderly Women talk of their Experiences of Vulnerability in KwaSwayimane Area.

Data will be collected using interview-schedules. In order to honour ethical obligations, ethical issues such as voluntary participation, confidentiality and anonymity of research participants will be assured. Permission will also be requested from participants for audio taping, which will be used by the researcher for record purposes only. Participants will be at liberty to consent or not consent to have their interviews recorded. Findings and key recommendations from the study will be made available to the Department on request. The study will also contribute to the existing body of knowledge regarding vulnerabilities experienced by the elderly women.

MOTIVATION AND AIM OF THE STUDY

The problem of elder abuse is undeniable and can be found everywhere in KZN including KwaSwayimani area. The Department of Social Development together with Non-Governmental Organizations are conducting awareness programmes on elder abuse but the problem still exist. In spite of these programmes, many abused elder persons are still in our midst. For an example, cases of elder abuse were reported by the Department of Social Development in 2013 of the 07 elderly women who were raped and assaulted, and the 04 elderly women who were robbed and murdered in KwaSwayimani area. Subsequently, these incidents prompted the Department of Social Development to build a Day Care Centre in KwaSwayimani area to protect the elderly people from being vulnerable to abuse.

In view of the current situation of elder abuse especially in KwaSwayimani area, the main aim of the study is to explore and understand vulnerabilities faced by the elderly women in KwaSwayimane Area under Umshwathi Local Municipality where an ever increasing number of incidents of elder abuse were noted.

FINANCIAL IMPLICATIONS

Mr. R.J. Mosoeu has been awarded a bursary by the Department of Social Development and has registered at the University of Kwa Zulu-Natal (Howard College) for a Master of Social Work (Research) Degree in the Discipline of Social Work in the academic year 2017. Attached is a letter of confirmation of a bursary.

RECOMMENDATION

It is recommended that the Head of Department grant approval for Mr. R.J. Mosoeu to conduct a research study on elderly women attending at KwaSwayimani Day Care Centre.

Mr. RJ Mosoeu:.....

Social Work Supervisor Grade 02

uMgungundlovu District

Date:.....

Supported/ not supported

.....

Ms. J.H. Ngubane

Date:.....

Deputy Director: Programme 2-4

Supported /Not Supported

.....

Mrs. C. Zondi

Date:.....

Acting Director

uMgungundlovu District

It is recommended that the Head of Department grant approval for Mr. R.J. Mosoeu to conduct a research study on elderly women attending at KwaSwayimani Day Care Centre.

Supported/ not supported

.....

Ms. P.NSithole

Date:

Chief Director

Pietermaritzburg Cluster

Supported/ not supported

.....

Dr. M.L. Ngcongo

Date:.....

Chief Director

Human Resource Management

Approved/ NotApproved

.....

Ms. N.G. Khanyile

Date:.....

Head of Department : Department of Social Development (KZN)

Appendix B: Informed Consent Form (Translated into Zulu Language)

INFORMED CONSENT FORM FOR PARTICIPANTS

Title of the Study: ‘Sihlukumezekile’: The Elderly Women talk of their Experiences of Vulnerability in KwaSwayimane Area.

To Whom It May Concern

My name is Ramosa Joseph Mosoeu, employed by the KZN Department of Social Development as a Social Work Supervisor Grade 02 at uMgungundlovu District Office. I am currently registered as a Masters’ student in the School of Social Work at the University of Kwa-Zulu Natal (Howard College)

I am conducting a research study aimed at understanding vulnerabilities faced by the elderly women in KwaSwayimane area with special reference to exploring their life-stories, challenges, ascertaining contributory factors to their vulnerabilities and their services requirements. I believe that my study will impact service delivery positively to vulnerable elderly women.

You are kindly requested to participate in one in-depth interview, which will be utilized only for the purpose of this study. Participation in this interview is voluntary, an anonymity will be ensured in the research report. Permission is also requested for audio taping, which will be used by the researcher for record purposes only.

I _____ hereby confirm that I understand the content of this document and the nature of the research project. I consent to participate in this study and did so under my own free will. I also understand that I am at liberty to withdraw from the project at any time, should I so desire.

Signature of Participant

Date

Signature of Researcher

Appendix C: Copy of Instrument

Semi- Structured Interview Schedule (Translated into Zulu Language)

Demographic Information

Participant

Race:

Age:

Marital Status:

Occupation:

Home Language:

Highest Grade Passed:

Residential Address:

Number of Dependents:

Total number in a household:

Total Household income per month:

The following questions will be explored in the interview:

Tell me about your life as a Senior Citizen in KwaSwayimane? Feel free to share your positives and negatives?

What personal challenges do you experience?

How these challenges affect your life in general?

Define and share your perceptions on vulnerability in terms of safety and fear?

What do you suggest to be the needs of the elderly?